Exhibit R-5 January Reports by Other Officeholders

AUSTIN CITY CLERK RECEIVED

Exhibit R-4 Zimmerman January 15, 2015 Report

eff. June 17, 2011.

Sec. 254.262. TRAVEL EXPENSE. A direct campaign expenditure consisting of personal travel expenses incurred by a person may be made without complying with Section 254.261.

Added by Acts 2011, 82nd Leg., R.S., Ch. 1009 (H.B. 2359), Sec. 5, eff. June 17, 2011.

reported; and

- (2) reasonable attorney's fees incurred in the suit.
- (d) Reasonable attorney's fees incurred in the suit may be awarded to the defendant if judgment is rendered in the defendant's favor.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987.

Sec. 254.232. LIABILITY TO STATE. A candidate, officeholder, or campaign treasurer or assistant campaign treasurer of a political committee who fails to report in whole or in part a political contribution or political expenditure as required by this chapter is liable in damages to the state in the amount of triple the amount not reported that is required to be reported.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987.

SUBCHAPTER J. REPORTING BY CERTAIN PERSONS MAKING DIRECT CAMPAIGN EXPENDITURES

- Sec. 254.261. DIRECT CAMPAIGN EXPENDITURE EXCEEDING \$100. (a) A person not acting in concert with another person who makes one or more direct campaign expenditures in an election from the person's own property shall comply with this chapter as if the person were the campaign treasurer of a general-purpose committee that does not file monthly reports under Section 254.155.
- (b) A person is not required to file a report under this section if the person is required to disclose the expenditure in another report required under this title within the time applicable under this section for reporting the expenditure.
- (c) This section does not require a general-purpose committee that files under the monthly reporting schedule to file reports under Section 254.154.
- (d) A person is not required to file a campaign treasurer appointment for making expenditures for which reporting is required under this section, unless the person is otherwise required to file a campaign treasurer appointment under this title.

Added by Acts 2011, 82nd Leg., R.S., Ch. 1009 (H.B. 2359), Sec. 5,

- (c) Political contributions disposed of under Subsection (a)(3) may be appropriated only for financing primary elections.
- (d) The amount of political contributions disposed of under Subsection (a)(4) to one person may not exceed the aggregate amount accepted from that person during the last two years that the candidate or officeholder accepted contributions under this title.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987; Acts 1997, 75th Leg., ch. 864, Sec. 248, eff. Sept. 1, 1997; Acts 2003, 78th Leg., ch. 249, Sec. 2.22, eff. Sept. 1, 2003.

Sec. 254.205. REPORT OF DISPOSITION OF UNEXPENDED CONTRIBUTIONS. (a) Not later than the 30th day after the date the six-year period prescribed by Section 254.203 ends, the person required to dispose of unexpended political contributions shall file a report of the disposition.

- (b) The report shall be filed with the authority with whom the person's campaign treasurer appointment was required to be filed.
 - (c) The report must include:
 - (1) the person's full name and address;
- (2) the full name and address of each person to whom a payment from unexpended political contributions is made; and
- (3) the date and amount of each payment reported under Subdivision (2).

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987.

SUBCHAPTER I. CIVIL LIABILITY

Sec. 254.231. LIABILITY TO CANDIDATES. (a) A candidate or campaign treasurer or assistant campaign treasurer of a political committee who fails to report in whole or in part a campaign contribution or campaign expenditure as required by this chapter is liable for damages as provided by this section.

- (b) Each opposing candidate whose name appears on the ballot is entitled to recover damages under this section.
 - (c) In this section, "damages" means:
 - (1) twice the amount not reported that is required to be

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987.

- Sec. 254.203. RETENTION OF CONTRIBUTIONS. (a) A person may not retain political contributions covered by this title, assets purchased with the contributions, or interest and other income earned on the contributions for more than six years after the date the person either ceases to be an officeholder or candidate or files a final report under this chapter, whichever is later.
- (b) If the person becomes an officeholder or candidate within the six-year period, the prohibition in Subsection (a) does not apply until the person again ceases to be an officeholder or candidate.
- (c) A person who violates Subsection (a) commits an offense. An offense under this section is a Class A misdemeanor.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987; Acts 1989, 71st Leg., ch. 2, Sec. 7.18, eff. Aug. 28, 1989.

- Sec. 254.204. DISPOSITION OF UNEXPENDED CONTRIBUTIONS. (a) At the end of the six-year period prescribed by Section 254.203, the former officeholder or candidate shall remit any unexpended political contributions to one or more of the following:
- (1) the political party with which the person was affiliated when the person's name last appeared on a ballot;
 - (2) a candidate or political committee;
 - (3) the comptroller for deposit in the state treasury;
- (4) one or more persons from whom political contributions were received, in accordance with Subsection (d);
- (5) a recognized charitable organization formed for educational, religious, or scientific purposes that is exempt from taxation under Section 501(c)(3), Internal Revenue Code of 1986, and its subsequent amendments; or
- (6) a public or private postsecondary educational institution or an institution of higher education as defined by Section 61.003(8), Education Code, solely for the purpose of assisting or creating a scholarship program.
- (b) A person who disposes of unexpended political contributions under Subsection (a)(2) shall report each contribution as if the person were a campaign treasurer of a specific-purpose committee.

required to file any reports of political contributions and political expenditures other than the semiannual reports required to be filed not later than July 15 and January 15.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987.

SUBCHAPTER H. UNEXPENDED CONTRIBUTIONS

- Sec. 254.201. ANNUAL REPORT OF UNEXPENDED CONTRIBUTIONS. (a) This section applies to:
- (1) a former officeholder who has unexpended political contributions after filing the last report required to be filed by Subchapter D; or
- (2) a person who was an unsuccessful candidate who has unexpended political contributions after filing the last report required to be filed by Subchapter C.
- (b) A person covered by this section shall file an annual report for each year in which the person retains unexpended contributions.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987.

- Sec. 254.202. FILING OF REPORT; CONTENTS. (a) A person shall file the report required by Section 254.201 not earlier than January 1 or later than January 15 of each year following the year in which the person files a final report under this chapter.
- (b) The report shall be filed with the authority with whom the person's campaign treasurer appointment was required to be filed.
 - (c) The report must include:
 - (1) the person's full name and address;
- (2) the full name and address of each person to whom a payment from unexpended political contributions was made during the previous year;
- (3) the date, amount, and purpose of each payment made under Subdivision (2);
- (4) the total amount of unexpended political contributions as of December 31 of the previous year; and
- (5) the total amount of interest and other income earned on unexpended political contributions during the previous year.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987.

- Sec. 254.182. DECLARATION OF INTENT REQUIRED. (a) To be entitled to file reports under this subchapter, an opposed candidate or specific-purpose committee must file with the campaign treasurer appointment a written declaration of intent not to exceed \$500 in political contributions or political expenditures in the election.
- (b) The declaration of intent must contain a statement that the candidate or committee understands that if the \$500 maximum for contributions and expenditures is exceeded, the candidate or committee is required to file reports under Subchapter C or E, as applicable.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987.

- Sec. 254.183. MAXIMUM EXCEEDED. (a) An opposed candidate or specific-purpose committee that exceeds \$500 in political contributions or political expenditures in the election shall file reports as required by Subchapter C or E, as applicable.
- (b) If a candidate or committee exceeds the \$500 maximum after the filing deadline prescribed by Subchapter C or E for the first report required to be filed under the appropriate subchapter, the candidate or committee shall file a report not later than 48 hours after the maximum is exceeded.
- (c) A report filed under Subsection (b) covers the period beginning the day the campaign treasurer appointment is filed and continuing through the day the maximum is exceeded.
- (d) The reporting period for the next report filed by the candidate or committee begins on the day after the last day of the period covered by the report filed under Subsection (b).

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987.

- Sec. 254.184. APPLICABILITY OF REGULAR REPORTING REQUIREMENTS.

 (a) Subchapter C or E, as applicable, applies to an opposed candidate or specific-purpose committee filing under this subchapter to the extent that the appropriate subchapter does not conflict with this subchapter.
- (b) A candidate or committee filing under this subchapter is not

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987; Acts 1993, 73rd Leg., ch. 107, Sec. 3.19, eff. Aug. 30, 1993.

Sec. 254.163. AUTHORITY WITH WHOM REPORTS FILED. Reports filed under this subchapter shall be filed with the commission.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987; Acts 1993, 73rd Leg., ch. 107, Sec. 3.20, eff. Aug. 30, 1993.

- Sec. 254.164. CERTAIN COMMITTEES EXEMPT FROM CIVIL PENALTIES. The commission may not impose a civil penalty on a general-purpose committee for a violation of this chapter if the report filed by the committee that is the subject of the violation discloses that the committee did not accept political contributions totaling \$3,000 or more, accept political contributions from a single person totaling \$1,000 or more, or make or authorize political expenditures totaling \$3,000 or more during:
- (1) the reporting period covered by the report that is the subject of the violation; or
- (2) either of the two reporting periods preceding the reporting period described by Subdivision (1).

Added by Acts 2007, 80th Leg., R.S., Ch. 597 (H.B. 89), Sec. 1, eff. September 1, 2007.

SUBCHAPTER G. MODIFIED REPORTING PROCEDURES; \$500 MAXIMUM IN CONTRIBUTIONS OR EXPENDITURES

- Sec. 254.181. MODIFIED REPORTING AUTHORIZED. (a) An opposed candidate or specific-purpose committee required to file reports under Subchapter C or E may file a report under this subchapter instead if the candidate or committee does not intend to accept political contributions that in the aggregate exceed \$500 or to make political expenditures that in the aggregate exceed \$500 in connection with the election.
- (b) The amount of a filing fee paid by a candidate is excluded from the \$500 maximum expenditure permitted under this section.

made, and other expenditures made by the committee. A report must be filed within the same period in which it is required to be filed under federal law or the law of the other state.

Added by Acts 2003, 78th Leg., ch. 249, Sec. 2.21, eff. Sept. 1, 2003.

Sec. 254.159. DISSOLUTION REPORT. If a general-purpose committee expects no reportable activity to occur after the period covered by a report filed under this subchapter, the report may be designated as a "dissolution" report as provided by Section 254.126 for a specific-purpose committee and has the same effect.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987.

Sec. 254.160. TERMINATION REPORT. If the campaign treasurer appointment of a general-purpose committee is terminated, the campaign treasurer shall file a termination report as prescribed by Section 254.127 for a specific-purpose committee.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987.

Sec. 254.161. NOTICE TO CANDIDATE AND OFFICEHOLDER OF CONTRIBUTIONS AND EXPENDITURES. If a general-purpose committee other than the principal political committee of a political party or a political committee established by a political party's county executive committee accepts political contributions or makes political expenditures for a candidate or officeholder, notice of that fact shall be given to the affected candidate or officeholder as provided by Section 254.128 for a specific-purpose committee.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987; Acts 1993, 73rd Leg., ch. 531, Sec. 3, eff. Sept. 1, 1993.

Sec. 254.162. NOTICE OF CHANGE IN COMMITTEE STATUS. If a general-purpose committee changes its operation and becomes a specific-purpose committee, notice of the change in status shall be given to the commission as provided by Section 254.129 for a specific-purpose committee.

- Sec. 254.157. MONTHLY REPORTING SCHEDULE. (a) The campaign treasurer of a general-purpose committee filing monthly reports shall file a report not later than the fifth day of the month following the period covered by the report. A report covering the month preceding an election in which the committee is involved must be received by the authority with whom the report is required to be filed not later than the fifth day of the month following the period covered by the report.
- (b) A monthly report covers the period beginning the 26th day of each month and continuing through the 25th day of the following month, except that the period covered by the first report begins January 1 and continues through January 25.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987; Acts 1991, 72nd Leg., ch. 400, Sec. 1, eff. Sept. 1, 1991. Amended by:

Acts 2007, 80th Leg., R.S., Ch. 673 (H.B. 1381), Sec. 4, eff. September 1, 2007.

Sec. 254.158. EXCEPTION TO MONTHLY REPORTING SCHEDULE. If the campaign treasurer appointment of a general-purpose committee filing monthly reports is filed after January 1 of the year in which monthly reports are filed, the period covered by the first monthly report begins the day the appointment is filed and continues through the 25th day of the month in which the appointment is filed unless the appointment is filed the 25th or a succeeding day of the month. In that case, the period continues through the 25th day of the month following the month in which the appointment is filed.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987.

Sec. 254.1581. REPORTING BY OUT-OF-STATE POLITICAL COMMITTEE. For each reporting period under this subchapter in which an out-of-state political committee accepts political contributions or makes political expenditures, the committee shall file with the commission a copy of one or more reports filed with the Federal Election Commission or with the proper filing authority of at least one other state that shows the political contributions accepted, political expenditures

during the reporting period.

Added by Acts 2005, 79th Leg., Ch. 1081 (H.B. 1664), Sec. 1, eff. September 1, 2005.

- Sec. 254.155. OPTION TO FILE MONTHLY; NOTICE. (a) As an alternative to filing reports under Sections 254.153 and 254.154, a general-purpose committee may file monthly reports.
- (b) To be entitled to file monthly reports, the committee must deliver written notice of the committee's intent to file monthly to the commission not earlier than January 1 or later than January 15 of the year in which the committee intends to file monthly. The notice for a committee formed after January 15 must be delivered at the time the committee's campaign treasurer appointment is filed.
- (c) A committee that files monthly reports may revert to the regular filing schedule prescribed by Sections 254.153 and 254.154 by delivering written notice of the committee's intent not earlier than January 1 or later than January 15 of the year in which the committee intends to revert to the regular reporting schedule. The notice must include a report of all political contributions accepted and all political expenditures made that were not previously reported.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987; Acts 1993, 73rd Leg., ch. 107, Sec. 3.18, eff. Aug. 30, 1993.

- Sec. 254.156. CONTENTS OF MONTHLY REPORTS. Each monthly report filed under this subchapter must comply with Sections 254.031 and 254.151 except that the maximum amount of a political contribution, expenditure, or loan that is not required to be individually reported is:
 - (1) \$10 in the aggregate; or
- (2) \$20 in the aggregate for a contribution accepted by a general-purpose committee to which Section 254.1541 applies.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987. Amended by:

Acts 2005, 79th Leg., Ch. 1081 (H.B. 1664), Sec. 2, eff. September 1, 2005.

involved in the election. The period covered by the first report begins the day the committee's campaign treasurer appointment is filed or the first day after the period covered by the committee's last required report, as applicable.

(e) In addition to other required reports, the campaign treasurer of a general-purpose committee involved in a runoff election shall file one report for the runoff election. The runoff election report must be received by the authority with whom the report is required to be filed not earlier than the 10th day or later than the eighth day before runoff election day. The report covers the period beginning the ninth day before the date of the main election and continuing through the 10th day before runoff election day.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987. Amended by:

Acts 2007, 80th Leg., R.S., Ch. 673 (H.B. 1381), Sec. 3, eff. September 1, 2007.

Acts 2009, 81st Leg., R.S., Ch. 553 (S.B. 1795), Sec. 2, eff. September 1, 2009.

- Sec. 254.1541. ALTERNATE REPORTING REQUIREMENTS FOR CERTAIN COMMITTEES. (a) This section applies only to a general-purpose committee with less than \$20,000 in one or more accounts maintained by the committee in which political contributions are deposited, as of the last day of the preceding reporting period for which the committee was required to file a report.
- (b) A report by a campaign treasurer of a general-purpose committee to which this section applies may include, instead of the information required under Sections 254.031(a)(1) and (5) and Section 254.151(6):
- (1) the amount of political contributions from each person that in the aggregate exceed \$100 and that are accepted during the reporting period by the committee, the full name and address of the person making the contributions, the person's principal occupation, and the dates of the contributions; and
- (2) the total amount or a specific listing of the political contributions of \$100 or less accepted and the total amount or a specific listing of the political expenditures of \$100 or less made

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987.

- Sec. 254.153. SEMIANNUAL REPORTING SCHEDULE FOR COMMITTEE. (a) The campaign treasurer of a general-purpose committee shall file two reports for each year as provided by this section.
- (b) The first report shall be filed not later than July 15. The report covers the period beginning January 1, the day the committee's campaign treasurer appointment is filed, or the first day after the period covered by the last report required to be filed under this subchapter, as applicable, and continuing through June 30.
- (c) The second report shall be filed not later than January 15. The report covers the period beginning July 1, the day the committee's campaign treasurer appointment is filed, or the first day after the period covered by the last report required to be filed under this subchapter, as applicable, and continuing through December 31.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987.

- Sec. 254.154. ADDITIONAL REPORTS OF COMMITTEE INVOLVED IN ELECTION. (a) In addition to other required reports, for each election in which a general-purpose committee is involved, the committee's campaign treasurer shall file two reports.
- (b) The first report must be received by the authority with whom the report is required to be filed not later than the 30th day before election day. The report covers the period beginning the day the committee's campaign treasurer appointment is filed or the first day after the period covered by the committee's last required report, as applicable, and continuing through the 40th day before election day.
- (c) The second report must be received by the authority with whom the report is required to be filed not later than the eighth day before election day. The report covers the period beginning the 39th day before election day and continuing through the 10th day before election day.
- (d) If a general-purpose committee becomes involved in an election after a reporting period prescribed by Subsection (b) or (c), the first report must be received by the authority with whom the report is required to be filed not later than the regular deadline for the report covering the period during which the committee becomes

report is filed, if applicable;

- (4) the name of each identified candidate or measure or classification by party of candidates supported or opposed by the committee, indicating whether the committee supports or opposes each listed candidate, measure, or classification by party of candidates;
- (5) the name of each identified officeholder or classification by party of officeholders assisted by the committee;
- (6) the principal occupation of each person from whom political contributions that in the aggregate exceed \$50 are accepted during the reporting period;
- (7) the amount of each political expenditure in the form of a political contribution made to a candidate, officeholder, or another political committee that is returned to the committee during the reporting period, the name of the person to whom the expenditure was originally made, and the date it is returned;
- (8) on a separate page or pages of the report, the identification of any contribution from a corporation or labor organization made and accepted under Subchapter D, Chapter 253; and
- (9) on a separate page or pages of the report, the identification of the name of the donor, the amount, and the date of any expenditure made by a corporation or labor organization to:
 - (A) establish or administer the political committee; or
- (B) finance the solicitation of political contributions to the committee under Section 253.100.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987; Acts 1991, 72nd Leg., ch. 304, Sec. 5.18, eff. Jan. 1, 1992; Acts 2003, 78th Leg., ch. 249, Sec. 2.20, eff. Sept. 1, 2003.

Sec. 254.152. TIME FOR REPORTING CERTAIN EXPENDITURES. If a general-purpose committee makes a political expenditure in the form of a political contribution to another general-purpose committee or to an out-of-state political committee and the contributing committee does not intend that the contribution be used in connection with a particular election, the contributing committee shall include the expenditure in the first report required to be filed under this subchapter after the expenditure is made.

required to be filed.

- (b) The notice shall be delivered not later than the next deadline for filing a report under this subchapter that:
 - (1) occurs after the change in status; and
- (2) would be applicable to the political committee if the committee had not changed its status.
- (c) The notice must indicate the filing authority with whom future filings are expected to be made.
- (d) A campaign treasurer commits an offense if the campaign treasurer fails to comply with this section. An offense under this section is a Class B misdemeanor.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987; Acts 1997, 75th Leg., ch. 864, Sec. 247, eff. Sept. 1, 1997.

This section was amended by the 84th Legislature. Pending publication of the current statutes, see H.B. 1114, 84th Legislature, Regular Session, for amendments affecting this section.

Sec. 254.130. AUTHORITY WITH WHOM REPORTS FILED. Reports filed under this subchapter shall be filed with the authority with whom the political committee's campaign treasurer appointment is required to be filed.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987; Acts 1999, 76th Leg., ch. 511, Sec. 4, eff. Sept. 1, 1999.

Amended by:

Acts 2009, 81st Leg., R.S., Ch. 518 (S.B. 1142), Sec. 1, eff. June 19, 2009.

SUBCHAPTER F. REPORTING BY GENERAL-PURPOSE COMMITTEE

Sec. 254.151. ADDITIONAL CONTENTS OF REPORTS. In addition to the contents required by Section 254.031, each report by a campaign treasurer of a general-purpose committee must include:

- (1) the committee's full name and address;
- (2) the full name, residence or business street address, and telephone number of the committee's campaign treasurer;
 - (3) the identity and date of the election for which the

- a report for that period is filed as provided by this subchapter.
- (c) The report covers the period beginning the day after the period covered by the last report required to be filed under this subchapter and continuing through the day the campaign treasurer appointment is terminated.
- (d) The report shall be filed not later than the 10th day after the date the campaign treasurer appointment is terminated.
- (e) Reportable activity contained in a termination report is not required to be included in any subsequent report of the committee that is filed under this subchapter. The period covered by the committee's first report filed under this subchapter after a termination report begins the day after the date the campaign treasurer appointment is terminated.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987.

- Sec. 254.128. NOTICE TO CANDIDATE AND OFFICEHOLDER OF CONTRIBUTIONS AND EXPENDITURES. (a) If a specific-purpose committee accepts political contributions or makes political expenditures for a candidate or officeholder, the committee's campaign treasurer shall deliver written notice of that fact to the affected candidate or officeholder not later than the end of the period covered by the report in which the reportable activity occurs.
- (b) The notice must include the full name and address of the political committee and its campaign treasurer and an indication that the committee is a specific-purpose committee.
- (c) A campaign treasurer commits an offense if the campaign treasurer fails to comply with this section. An offense under this section is a Class A misdemeanor.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987; Acts 1997, 75th Leg., ch. 864, Sec. 246, eff. Sept. 1, 1997.

Sec. 254.129. NOTICE OF CHANGE IN COMMITTEE STATUS. (a) If a specific-purpose committee changes its operation and becomes a general-purpose committee, the committee's campaign treasurer shall deliver written notice of the change in status to the authority with whom the specific-purpose committee's reports under this chapter are

committee's campaign treasurer may designate the report as a "final" report.

- (b) The designation of a report as a final report:
- (1) relieves the campaign treasurer of the duty to file additional reports under this subchapter, except as provided by Subsection (c); and
- (2) terminates the committee's campaign treasurer appointment.
- (c) If, after a committee's final report is filed, reportable activity with respect to the election occurs, the committee must file the appropriate reports under this subchapter and is otherwise subject to the provisions of this title applicable to political committees. A report filed under this subsection may be designated as a final report.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987.

- Sec. 254.126. DISSOLUTION REPORT OF COMMITTEE FOR ASSISTING OFFICEHOLDER. (a) If a specific-purpose committee for assisting an officeholder expects no reportable activity to occur after the period covered by a report filed under this subchapter, the committee's campaign treasurer may designate the report as a "dissolution" report.
 - (b) The filing of a report designated as a dissolution report:
- (1) relieves the campaign treasurer of the duty to file additional reports under this subchapter; and
- (2) terminates the committee's campaign treasurer appointment.
- (c) A dissolution report must contain an affidavit, executed by the committee's campaign treasurer, that states that all the committee's reportable activity has been reported.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987.

- Sec. 254.127. TERMINATION REPORT. (a) If the campaign treasurer appointment of a specific-purpose committee is terminated, the terminated campaign treasurer shall file a termination report.
- (b) A termination report is not required if the termination occurs on the last day of a reporting period under this subchapter and

whom the report is required to be filed not later than the eighth day before election day. The report covers the period beginning the 39th day before election day and continuing through the 10th day before election day.

- (d) If a specific-purpose committee supports or opposes a candidate or measure in an election after a reporting period prescribed by Subsection (b) or (c), the first report must be received by the authority with whom the report is required to be filed not later than the regular deadline for the report covering the period during which the committee becomes involved in the election. The period covered by the first report begins the day the committee's campaign treasurer appointment is filed or the first day after the period covered by the committee's last required report, as applicable.
- (e) In addition to other required reports, the campaign treasurer of a specific-purpose committee that supports or opposes a candidate in a runoff election shall file one report for the runoff election. The runoff election report must be received by the authority with whom the report is required to be filed not later than the eighth day before runoff election day. The report covers the period beginning the ninth day before the date of the main election and continuing through the 10th day before runoff election day.
- (f) This section does not apply to a specific-purpose committee supporting only candidates who do not have opponents whose names are to appear on the ballot.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987; Acts 1989, 71st Leg., ch. 2, Sec. 7.17(a), eff. Aug. 28, 1989. Amended by:

Acts 2007, 80th Leg., R.S., Ch. 673 (H.B. 1381), Sec. 2, eff. September 1, 2007.

Acts 2009, 81st Leg., R.S., Ch. 553 (S.B. 1795), Sec. 1, eff. September 1, 2009.

Sec. 254.125. FINAL REPORT OF COMMITTEE FOR SUPPORTING OR OPPOSING CANDIDATE OR MEASURE. (a) If a specific-purpose committee for supporting or opposing a candidate or measure expects no reportable activity in connection with the election to occur after the period covered by a report filed under this subchapter, the

Sec. 254.122. INVOLVEMENT IN MORE THAN ONE ELECTION BY CERTAIN COMMITTEES. If a specific-purpose committee for supporting or opposing more than one candidate becomes involved in more than one election for which the reporting periods prescribed by Section 254.124 overlap, the reportable activity that occurs during the overlapping period is not required to be included in a report filed after the first report in which the activity is required to be reported.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987.

- Sec. 254.123. SEMIANNUAL REPORTING SCHEDULE FOR COMMITTEE. (a) The campaign treasurer of a specific-purpose committee shall file two reports for each year as provided by this section.
- (b) The first report shall be filed not later than July 15. The report covers the period beginning January 1, the day the committee's campaign treasurer appointment is filed, or the first day after the period covered by the last report required to be filed under this subchapter, as applicable, and continuing through June 30.
- (c) The second report shall be filed not later than January 15. The report covers the period beginning July 1, the day the committee's campaign treasurer appointment is filed, or the first day after the period covered by the last report required to be filed under this subchapter, as applicable, and continuing through December 31.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987.

- Sec. 254.124. ADDITIONAL REPORTS OF COMMITTEE FOR SUPPORTING OR OPPOSING CANDIDATE OR MEASURE. (a) In addition to other required reports, for each election in which a specific-purpose committee supports or opposes a candidate or measure, the committee's campaign treasurer shall file two reports.
- (b) The first report must be received by the authority with whom the report is required to be filed not later than the 30th day before election day. The report covers the period beginning the day the committee's campaign treasurer appointment is filed or the first day after the period covered by the committee's last required report, as applicable, and continuing through the 40th day before election day.
 - (c) The second report must be received by the authority with

- (6) the amount of each political expenditure in the form of a political contribution that is made to a candidate, officeholder, or another political committee and that is returned to the committee during the reporting period, the name of the person to whom the expenditure was originally made, and the date it is returned;
- (7) on a separate page or pages of the report, the identification of any payment from political contributions made to a business in which the candidate or officeholder has a participating interest of more than 10 percent, holds a position on the governing body of the business, or serves as an officer of the business; and
- (8) on a separate page or pages of the report, the identification of any contribution from a corporation or labor organization made and accepted under Subchapter D, Chapter 253.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987; Acts 1991, 72nd Leg., ch. 304, Sec. 5.17, eff. Jan. 1, 1992.

Sec. 254.1211. ADDITIONAL CONTENTS OF REPORTS OF CERTAIN COMMITTEES. In addition to the contents required by Sections 254.031 and 254.121, each report by a specific-purpose committee for supporting or opposing a candidate for or assisting a holder of a judicial office covered by Subchapter F, Chapter 253, must include the contents prescribed by Section 254.0611.

Added by Acts 1995, 74th Leg., ch. 763, Sec. 5, eff. July 1, 1995.

Sec. 254.1212. ADDITIONAL CONTENTS OF REPORTS OF COMMITTEE SUPPORTING OR OPPOSING CANDIDATE FOR STATEWIDE EXECUTIVE OFFICEHOLDERS OR LEGISLATIVE OFFICEHOLDERS OR ASSISTING STATEWIDE EXECUTIVE OFFICEHOLDERS OR LEGISLATIVE OFFICEHOLDERS. In addition to the contents required by Sections 254.031 and 254.121, each report by a specific-purpose committee for supporting or opposing a candidate for or assisting a holder of a statewide office in the executive branch or a legislative office must include the contents prescribed by Section 254.0612.

Added by Acts 2003, 78th Leg., ch. 249, Sec. 2.19, eff. Sept. 1, 2003.

the officeholder is not required to file a report covering that period.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987; Acts 1993, 73rd Leg., ch. 107, Sec. 3.17, eff. Aug. 30, 1993.

Sec. 254.096. OFFICEHOLDER WHO BECOMES CANDIDATE. An officeholder who becomes a candidate is subject to Subchapter C during each period covered by a report required to be filed under Subchapter C.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987.

Sec. 254.097. AUTHORITY WITH WHOM REPORTS FILED. Reports under this subchapter shall be filed with the authority with whom a campaign treasurer appointment by a candidate for the office held by the officeholder is required to be filed.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987; Acts 1999, 76th Leg., ch. 511, Sec. 3, eff. Sept. 1, 1999. Amended by:

Acts 2009, 81st Leg., R.S., Ch. 518 (S.B. 1142), Sec. 1, eff. June 19, 2009.

SUBCHAPTER E. REPORTING BY SPECIFIC-PURPOSE COMMITTEE

Sec. 254.121. ADDITIONAL CONTENTS OF REPORTS. In addition to the contents required by Section 254.031, each report by a campaign treasurer of a specific-purpose committee must include:

- (1) the committee's full name and address;
- (2) the full name, residence or business street address, and telephone number of the committee's campaign treasurer;
- (3) the identity and date of the election for which the report is filed, if applicable;
- (4) the name of each candidate and each measure supported or opposed by the committee, indicating for each whether the committee supports or opposes;
 - (5) the name of each officeholder assisted by the committee;

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987; Acts 1991, 72nd Leg., ch. 304, Sec. 5.16, eff. Jan. 1, 1992.

Sec. 254.093. SEMIANNUAL REPORTING SCHEDULE FOR OFFICEHOLDER.

- (a) An officeholder shall file two reports for each year as provided by this section.
- (b) The first report shall be filed not later than July 15. The report covers the period beginning January 1, the day the officeholder takes office, or the first day after the period covered by the last report required to be filed under this chapter, as applicable, and continuing through June 30.
- (c) The second report shall be filed not later than January 15. The report covers the period beginning July 1, the day the officeholder takes office, or the first day after the period covered by the last report required to be filed under this chapter, as applicable, and continuing through December 31.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987.

- Sec. 254.094. REPORT FOLLOWING APPOINTMENT OF CAMPAIGN TREASURER. (a) An officeholder who appoints a campaign treasurer shall file a report as provided by this section.
- (b) The report covers the period beginning the first day after the period covered by the last report required to be filed under this chapter or the day the officeholder takes office, as applicable, and continuing through the day before the date the officeholder's campaign treasurer is appointed.
- (c) The report shall be filed not later than the 15th day after the date the officeholder's campaign treasurer is appointed.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987.

Sec. 254.095. REPORT NOT REQUIRED. If at the end of any reporting period prescribed by this subchapter an officeholder who is required to file a report with an authority other than the commission has not accepted political contributions that in the aggregate exceed \$500 or made political expenditures that in the aggregate exceed \$500,

held;

- (2) for each political committee from which the officeholder received notice under Section 254.128 or 254.161:
 - (A) the committee's full name and address;
- (B) an indication of whether the committee is a general-purpose committee or a specific-purpose committee; and
- (C) the full name and address of the committee's campaign treasurer; and
- (3) on a separate page or pages of the report, the identification of any payment from political contributions made to a business in which the officeholder has a participating interest of more than 10 percent, holds a position on the governing body of the business, or serves as an officer of the business.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987; Acts 1991, 72nd Leg., ch. 304, Sec. 5.15, eff. Jan. 1, 1992.

Sec. 254.0911. ADDITIONAL CONTENTS OF REPORTS BY CERTAIN JUDICIAL OFFICEHOLDERS. In addition to the contents required by Sections 254.031 and 254.091, each report by a holder of a judicial office covered by Subchapter F, Chapter 253, must include the contents prescribed by Section 254.0611.

Added by Acts 1995, 74th Leg., ch. 763, Sec. 4, eff. July 1, 1995.

Sec. 254.0912. ADDITIONAL CONTENTS OF REPORTS BY STATEWIDE EXECUTIVE OFFICEHOLDERS AND LEGISLATIVE OFFICEHOLDERS. In addition to the contents required by Sections 254.031 and 254.091, each report by a holder of a statewide office in the executive branch or a legislative office must include the contents prescribed by Section 254.0612.

Added by Acts 2003, 78th Leg., ch. 249, Sec. 2.18, eff. Sept. 1, 2003.

Sec. 254.092. CERTAIN OFFICEHOLDER EXPENDITURES EXCLUDED. An officeholder is not required to report officeholder expenditures made from the officeholder's personal funds, except as provided by Section 253.035(h).

Acts 2007, 80th Leg., R.S., Ch. 673 (H.B. 1381), Sec. 1, eff. September 1, 2007.

Sec. 254.065. FINAL REPORT. (a) If a candidate expects no reportable activity in connection with the candidacy to occur after the period covered by a report filed under this subchapter, the candidate may designate the report as a "final" report.

- (b) The designation of a report as a final report:
- (1) relieves the candidate of the duty to file additional reports under this subchapter, except as provided by Subsection (c); and
- (2) terminates the candidate's campaign treasurer appointment.
- (c) If, after a candidate's final report is filed, reportable activity with respect to the candidacy occurs, the candidate shall file the appropriate reports under this subchapter and is otherwise subject to the provisions of this title applicable to candidates. A report filed under this subsection may be designated as a final report.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987.

Sec. 254.066. AUTHORITY WITH WHOM REPORTS FILED. Reports under this subchapter shall be filed with the authority with whom the candidate's campaign treasurer appointment is required to be filed.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987; Acts 1999, 76th Leg., ch. 511, Sec. 2, eff. Sept. 1, 1999. Amended by:

Acts 2009, 81st Leg., R.S., Ch. 518 (S.B. 1142), Sec. 1, eff. June 19, 2009.

SUBCHAPTER D. REPORTING BY OFFICEHOLDER

- Sec. 254.091. ADDITIONAL CONTENTS OF REPORTS. In addition to the contents required by Section 254.031, each report by an officeholder must include:
 - (1) the officeholder's full name and address and the office

subchapter, as applicable, and continuing through December 31.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987.

- Sec. 254.064. ADDITIONAL REPORTS OF OPPOSED CANDIDATE. (a) In addition to other required reports, for each election in which a person is a candidate and has an opponent whose name is to appear on the ballot, the person shall file two reports.
- (b) The first report must be received by the authority with whom the report is required to be filed not later than the 30th day before election day. The report covers the period beginning the day the candidate's campaign treasurer appointment is filed or the first day after the period covered by the last report required to be filed under this chapter, as applicable, and continuing through the 40th day before election day.
- (c) The second report must be received by the authority with whom the report is required to be filed not later than the eighth day before election day. The report covers the period beginning the 39th day before election day and continuing through the 10th day before election day.
- (d) If a person becomes an opposed candidate after a reporting period prescribed by Subsection (b) or (c), the person's first report must be received by the authority with whom the report is required to be filed not later than the regular deadline for the report covering the period during which the person becomes an opposed candidate. The period covered by the first report begins the day the candidate's campaign treasurer appointment is filed.
- (e) In addition to other required reports, an opposed candidate in a runoff election shall file one report for that election. The runoff election report must be received by the authority with whom the report is required to be filed not later than the eighth day before runoff election day. The report covers the period beginning the ninth day before the date of the main election and continuing through the 10th day before runoff election day.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987; Acts 1997, 75th Leg., ch. 864, Sec. 245, eff. Sept. 1, 1997. Amended by:

Added by Acts 1995, 74th Leg., ch. 763, Sec. 3, eff. July 1, 1995.

Sec. 254.0612. ADDITIONAL CONTENTS OF REPORTS BY CANDIDATE FOR STATEWIDE EXECUTIVE OFFICE OR LEGISLATIVE OFFICE. In addition to the contents required by Sections 254.031 and 254.061, each report by a candidate for a statewide office in the executive branch or a legislative office must include, for each individual from whom the person filing the report has accepted political contributions that in the aggregate equal or exceed \$500 and that are accepted during the reporting period:

- (1) the individual's principal occupation or job title; and
- (2) the full name of the individual's employer.

Added by Acts 2003, 78th Leg., ch. 249, Sec. 2.17, eff. Sept. 1, 2003.

Sec. 254.062. CERTAIN OFFICEHOLDER ACTIVITY INCLUDED. If an officeholder who becomes a candidate has reportable activity that is not reported under Subchapter D before the end of the period covered by the first report the candidate is required to file under this subchapter, the reportable activity shall be included in the first report filed under this subchapter instead of in a report filed under Subchapter D.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987.

Sec. 254.063. SEMIANNUAL REPORTING SCHEDULE FOR CANDIDATE. (a) A candidate shall file two reports for each year as provided by this section.

- (b) The first report shall be filed not later than July 15. The report covers the period beginning January 1, the day the candidate's campaign treasurer appointment is filed, or the first day after the period covered by the last report required to be filed under this subchapter, as applicable, and continuing through June 30.
- (c) The second report shall be filed not later than January 15. The report covers the period beginning July 1, the day the candidate's campaign treasurer appointment is filed, or the first day after the period covered by the last report required to be filed under this

- Sec. 254.0611. ADDITIONAL CONTENTS OF REPORTS BY CERTAIN JUDICIAL CANDIDATES. (a) In addition to the contents required by Sections 254.031 and 254.061, each report by a candidate for a judicial office covered by Subchapter F, Chapter 253, must include:
- (1) the total amount of political contributions, including interest or other income, maintained in one or more accounts in which political contributions are deposited as of the last day of the reporting period;
- (2) for each individual from whom the person filing the report has accepted political contributions that in the aggregate exceed \$50 and that are accepted during the reporting period:
- (A) the principal occupation and job title of the individual and the full name of the employer of the individual or of the law firm of which the individual or the individual's spouse is a member, if any; or
- (B) if the individual is a child, the full name of the law firm of which either of the individual's parents is a member, if any;
- (3) a specific listing of each asset valued at \$500 or more that was purchased with political contributions and on hand as of the last day of the reporting period;
- (4) for each political contribution accepted by the person filing the report but not received as of the last day of the reporting period:
- (A) the full name and address of the person making the contribution;
 - (B) the amount of the contribution; and
 - (C) the date of the contribution; and
- (5) for each outstanding loan to the person filing the report as of the last day of the reporting period:
- (A) the full name and address of the person or financial institution making the loan; and
- (B) the full name and address of each guarantor of the loan other than the candidate.
 - (b) In this section:
 - (1) "Child" has the meaning assigned by Section 253.158.
- (2) "Law firm" and "member" have the meanings assigned by Section 253.157.

notice; and

- (3) the report is not filed before the 30th day after the date on which the person required to file the report receives the notice required by Subdivision (2).
- (d) The court shall award a plaintiff who prevails in an action under this section reasonable attorney's fees and court costs.

Added by Acts 2003, 78th Leg., ch. 249, Sec. 2.16, eff. Sept. 1, 2003.

SUBCHAPTER C. REPORTING BY CANDIDATE

Sec. 254.061. ADDITIONAL CONTENTS OF REPORTS. In addition to the contents required by Section 254.031, each report by a candidate must include:

- (1) the candidate's full name and address, the office sought, and the identity and date of the election for which the report is filed;
- (2) the campaign treasurer's name, residence or business street address, and telephone number;
- (3) for each political committee from which the candidate received notice under Section 254.128 or 254.161:
 - (A) the committee's full name and address;
- (B) an indication of whether the committee is a general-purpose committee or a specific-purpose committee; and
- (C) the full name and address of the committee's campaign treasurer; and
- (4) on a separate page or pages of the report, the identification of any payment from political contributions made to a business in which the candidate has a participating interest of more than 10 percent, holds a position on the governing body of the business, or serves as an officer of the business.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987; Acts 1991, 72nd Leg., ch. 304, Sec. 5.14, eff. Jan. 1, 1992. Amended by:

Acts 2011, 82nd Leg., R.S., Ch. 1009 (H.B. 2359), Sec. 4, eff. June 17, 2011.

(d) Repealed by Acts 1991, 72nd Leg., ch. 304, Sec. 5.20, eff. Jan. 1, 1992.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987; Acts 1991, 72nd Leg., ch. 304, Sec. 5.13, eff. Jan. 1, 1992; Acts 1993, 73rd Leg., ch. 107, Sec. 3.16, eff. Aug. 30, 1993; Acts 2003, 78th Leg., ch. 249, Sec. 2.15, eff. Sept. 1, 2003. Amended by:

Acts 2007, 80th Leg., R.S., Ch. 1294 (S.B. 64), Sec. 2, eff. September 1, 2007.

- Sec. 254.043. ACTION TO REQUIRE COMPLIANCE. (a) This section applies only to:
- (1) a person required to file reports under this chapter with the commission; or
- (2) a person required to file reports under this chapter with an authority other than the commission in connection with an office of a political subdivision in a county with a population of at least 500,000.
- (b) A resident of the territory served by an office may bring an action for injunctive relief against a candidate for or holder of that office or a specific-purpose committee for supporting or opposing such a candidate or assisting such an officeholder to require the person to file a report under this chapter that the person has failed to timely file.
- (c) An action under this section may be brought against a person required to file reports under this chapter only if:
- (1) the report is not filed before the 60th day after the date on which the report was required to be filed;
- (2) not earlier than the 60th day after the date on which the report was required to be filed, the person bringing the action delivers written notice by certified mail to the person required to file the report, stating:
- (A) the person's intention to bring an action under this section if the report is not filed; and
- (B) that an action to require the filing of the report may be filed if the report is not filed before the 30th day after the date on which the person required to file the report receives the

- (1) the information was required to be included in a semiannual report; and
- (2) the person amended the report within the time prescribed by Section $254.0405\,\text{(b)}$ or under the circumstances described by Section $254.0405\,\text{(c)}$.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987; Acts 1999, 76th Leg., ch. 1434, Sec. 4, eff. Sept. 1, 1999; Acts 2001, 77th Leg., ch. 1420, Sec. 4A.001, eff. Sept. 1, 2001. Amended by:

Acts 2011, 82nd Leg., R.S., Ch. 561 (H.B. 3093), Sec. 2, eff. September 1, 2011.

- Sec. 254.042. CIVIL PENALTY FOR LATE REPORT. (a) The commission shall determine from any available evidence whether a report required to be filed with the commission under this chapter is late. On making that determination, the commission shall immediately mail a notice of the determination to the person required to file the report.
- If a report other than a report under Section 254.064(c), 254.124(c), or 254.154(c) or the first report under Section 254.063 or 254.123 that is required to be filed following the primary or general election is determined to be late, the person required to file the report is liable to the state for a civil penalty of \$500. If a report under Section 254.064(c), 254.124(c), or 254.154(c) or the first report under Section 254.063 or 254.153 that is required to be filed following the primary or general election is determined to be late, the person required to file the report is liable to the state for a civil penalty of \$500 for the first day the report is late and \$100 for each day thereafter that the report is late. If a report is more than 30 days late, the commission shall issue a warning of liability by registered mail to the person required to file the report. If the penalty is not paid before the 10th day after the date on which the warning is received, the person is liable for a civil penalty in an amount determined by commission rule, but not to exceed \$10,000.
- (c) A penalty paid voluntarily under this section shall be deposited in the State Treasury to the credit of the General Revenue Fund.

information.

Added by Acts 1999, 76th Leg., ch. 1434, Sec. 3, eff. Sept. 1, 1999.

Sec. 254.0405. AMENDMENT OF FILED REPORT. (a) A person who files a semiannual report under this chapter may amend the report.

- (b) A semiannual report that is amended before the eighth day after the date the original report was filed is considered to have been filed on the date on which the original report was filed.
- (c) A semiannual report that is amended on or after the eighth day after the original report was filed is considered to have been filed on the date on which the original report was filed if:
- (1) the amendment is made before any complaint is filed with regard to the subject of the amendment; and
- (2) the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

Added by Acts 2011, 82nd Leg., R.S., Ch. 561 (H.B. 3093), Sec. 1, eff. September 1, 2011.

Sec. 254.041. CRIMINAL PENALTY FOR UNTIMELY OR INCOMPLETE REPORT. (a) A person who is required by this chapter to file a report commits an offense if the person knowingly fails:

- (1) to file the report on time;
- (2) to file a report by computer diskette, modem, or other means of electronic transfer, if the person is required to file reports that comply with Section 254.036(b); or
- (3) to include in the report information that is required by this title to be included.
- (b) Except as provided by Subsection (c), an offense under this section is a Class C misdemeanor.
- (c) A violation of Subsection (a)(3) by a candidate or officeholder is a Class A misdemeanor if the report fails to include information required by Section 254.061(3) or Section 254.091(2), as applicable.
- (d) It is an exception to the application of Subsection (a)(3) that:

- (2) with a student enrollment of more than 15,000.
- (b) A report filed under this chapter by a member of the board of trustees of a school district, a candidate for membership on the board of trustees of a school district, or a specific-purpose committee for supporting, opposing, or assisting a candidate or member of a board of trustees of a school district must be posted on the Internet website of the school district.
- (c) A report to which Subsection (b) applies must be available to the public on the Internet website not later than the fifth business day after the date the report is filed with the school district.
- (d) The access allowed by this section to reports is in addition to the public's access to the information through other electronic or print distribution of the information.
- (e) Before making a report available on the Internet under this section, the school district may remove each portion, other than city, state, and zip code, of the address of a person listed as having made a political contribution to the person filing the report. If the address information is removed as permitted by this subsection, the information must remain available on the report maintained in the school district's office.

Added by Acts 2011, 82nd Leg., R.S., Ch. 1272 (H.B. 336), Sec. 1, eff. September 1, 2011.

- Sec. 254.0402. PUBLIC INSPECTION OF REPORTS. (a) Notwithstanding Section 552.222(a), Government Code, the authority with whom a report is filed under this chapter may not require a person examining the report to provide any information or identification.
- (b) The commission shall make information from reports filed with the commission under Section 254.036(b) available by electronic means, including:
- (1) providing access to computer terminals at the commission's office;
- (2) providing information on computer diskette for purchase at a reasonable cost; and
 - (3) providing modem or other electronic access to the

more shall make a report filed with the clerk by a candidate, officeholder, or specific-purpose committee under this subchapter in connection with the office of mayor or member of the municipality's governing body available to the public on the municipality's Internet website not later than the fifth business day after the date the report is received.

- (d) The access allowed by this section to reports is in addition to the public's access to the information through other electronic or print distribution of the information.
- (e) Before making a report filed under Section 254.036(b) available on the Internet, the commission shall remove each portion, other than city, state, and zip code, of the address of a person listed as having made a political contribution to the person filing the report. The address information removed must remain available on the report maintained in the commission's office but may not be available electronically at that office.
- (f) The commission shall clearly state on the Internet website on which reports are provided that reports filed by an independent candidate, a third-party candidate, or a specific-purpose committee for supporting or opposing an independent or third-party candidate will not be available if the candidate or committee has not yet filed a report.

Added by Acts 1999, 76th Leg., ch. 1434, Sec. 3, eff. Sept. 1, 1999. Amended by Acts 2003, 78th Leg., ch. 249, Sec. 2.14, 2.26, eff. Sept. 1, 2003; Acts 2003, 78th Leg., ch. 567, Sec. 1, eff. Sept. 1, 2003. Amended by:

Acts 2013, 83rd Leg., R.S., Ch. 847 (H.B. 195), Sec. 1, eff. September 1, 2013.

Acts 2013, 83rd Leg., R.S., Ch. 847 (H.B. 195), Sec. 2, eff. September 1, 2013.

Acts 2013, 83rd Leg., R.S., Ch. 847 (H.B. 195), Sec. 3(a), eff. September 1, 2013.

Sec. 254.04011. AVAILABILITY OF REPORTS OF SCHOOL TRUSTEES ON INTERNET. (a) This section applies only to a school district:

(1) located wholly or partly in a municipality with a population of more than 500,000; and

making the contribution, and the date of the contribution.

(d) A report is not required under this section if a person covered by Subsection (a) is required to file another report under this chapter not later than the 10th day after the date a report required under this section would be due.

Added by Acts 1991, 72nd Leg., ch. 304, Sec. 5.12, eff. Jan. 1, 1992.

Sec. 254.040. PRESERVATION OF REPORTS; RECORD OF INSPECTION.

- (a) Each report filed under this chapter shall be preserved by the authority with whom it is filed for at least two years after the date it is filed.
- (b) Each time a person requests to inspect a report, the commission shall place in the file a statement of the person's name and address, whom the person represents, and the date of the request. The commission shall retain that statement in the file for one year after the date the requested report is filed. This subsection does not apply to a request to inspect a report by:
- (1) a member or employee of the commission acting on official business; or
 - (2) an individual acting on the individual's own behalf.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987; Acts 1997, 75th Leg., ch. 1134, Sec. 8, eff. Sept. 1, 1997.

- Sec. 254.0401. AVAILABILITY OF REPORTS ON INTERNET. (a) The commission shall make each report filed with the commission under Section 254.036(b) available to the public on the Internet not later than the second business day after the date the report is filed.
- (a-1) The county clerk of a county with a population of 800,000 or more shall make a report filed with the clerk by a candidate, officeholder, or specific-purpose committee under this subchapter in connection with a county office or the office of county commissioner available to the public on the county's Internet website not later than the fifth business day after the date the report is received.
- (b) Repealed by Acts 2013, 83rd Leg., R.S., Ch. 847, Sec. 3(a), eff. September 1, 2013.
 - (c) The clerk of a municipality with a population of 500,000 or

- (a-2) Each report required by Subsection (a)(1) must include the amount of the contributions specified by that subsection, the full name and address of the person making the contributions, and the dates of the contributions.
- (b) Each report required by Subsection (a)(2) must include the amount of the expenditures, the full name and address of the persons to whom the expenditures are made, and the dates and purposes of the expenditures.
- (c) To the extent of a conflict between this section and Section 254.036, this section controls.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987; Acts 1989, 71st Leg., ch. 994, Sec. 2, eff. Sept. 1, 1989; Acts 1993, 73rd Leg., ch. 107, Sec. 3.15, eff. Aug. 30, 1993. Amended by:

Acts 2005, 79th Leg., Ch. 174 (H.B. 350), Sec. 3, eff. October 1, 2005.

Acts 2005, 79th Leg., Ch. 174 (H.B. 350), Sec. 4, eff. October 1, 2005.

Acts 2007, 80th Leg., R.S., Ch. 1294 (S.B. 64), Sec. 1, eff. September 1, 2007.

- Sec. 254.0391. REPORT DURING SPECIAL LEGISLATIVE SESSION. (a) A statewide officeholder, a member of the legislature, or a specific-purpose committee for supporting, opposing, or assisting a statewide officeholder or member of the legislature, or a candidate for statewide office or the legislature or a specific-purpose committee for supporting or opposing the candidate, that accepts a political contribution during the period beginning on the date the governor signs the proclamation calling a special legislative session and continuing through the date of final adjournment shall report the contribution to the commission not later than the 30th day after the date of final adjournment.
- (b) A determination to accept or refuse the political contribution shall be made not later than the third day after the date the contribution is received.
- (c) Each report required by this section must include the amount of the political contribution, the full name and address of the person

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987; Acts 1989, 71st Leg., ch. 994, Sec. 1, eff. Sept. 1, 1989; Acts 1993, 73rd Leg., ch. 107, Sec. 3.14, eff. Aug. 30, 1993; Acts 2001, 77th Leg., ch. 1428, Sec. 1, eff. Sept. 1, 2001; Acts 2003, 78th Leg., ch. 249, Sec. 2.13, eff. Sept. 1, 2003.

Amended by:

Acts 2005, 79th Leg., Ch. 174 (H.B. 350), Sec. 1, eff. October 1, 2005.

Acts 2005, 79th Leg., Ch. 174 (H.B. 350), Sec. 2, eff. October 1, 2005.

Acts 2007, 80th Leg., R.S., Ch. 472 (H.B. 2195), Sec. 2, eff. September 1, 2007.

Sec. 254.039. SPECIAL REPORT NEAR ELECTION BY CERTAIN GENERAL-PURPOSE COMMITTEES. (a) In addition to other reports required by this chapter, a general-purpose committee shall file additional reports during the period beginning the ninth day before election day and ending at 12 noon on the day before election day if the committee:

- (1) accepts political contributions from a person that in the aggregate exceed \$5,000 during that reporting period; or
- (2) makes direct campaign expenditures supporting or opposing either a single candidate that in the aggregate exceed \$1,000 or a group of candidates that in the aggregate exceed \$15,000 during that reporting period.
- (a-1) A report under this section shall be filed electronically, by telegram or telephonic facsimile machine, or by hand, in the form required by Section 254.036. The commission must receive a report under this section not later than 5 p.m. of the first business day after the date the contribution is accepted or the expenditure is made. A report under this section is not required to be accompanied by the affidavit required under Section 254.036(h) or to be submitted on a form prescribed by the commission. A report under this section that complies with Section 254.036(a) must be accompanied by an affidavit under Section 254.036(c)(1) unless the committee has submitted an affidavit under Section 254.036(c)(1) with another report filed in connection with the election for which a report is required under this section.

Acts 2007, 80th Leg., R.S., Ch. 472 (H.B. 2195), Sec. 1, eff. September 1, 2007.

- Sec. 254.038. SPECIAL REPORT NEAR ELECTION BY CERTAIN CANDIDATES AND POLITICAL COMMITTEES. (a) In addition to other reports required by this chapter, the following persons shall file additional reports during the period beginning the ninth day before election day and ending at 12 noon on the day before election day:
- (1) a candidate for an office specified by Section 252.005(1) who accepts political contributions from a person that in the aggregate exceed \$1,000 during that reporting period; and
- (2) a specific-purpose committee for supporting or opposing a candidate described by Subdivision (1) and that accepts political contributions from a person that in the aggregate exceed \$1,000 during that reporting period.
- (b) Each report required by this section must include the amount of the contributions specified by Subsection (a), the full name and address of the person making the contributions, and the dates of the contributions.
- (c) A report under this section shall be filed electronically, by telegram or telephonic facsimile machine, or by hand, in the form required by Section 254.036. The commission must receive a report under this section filed by telegram, telephonic facsimile machine, or hand not later than 5 p.m. of the first business day after the date the contribution is accepted. The commission must receive a report under this section filed electronically not later than midnight of the first business day after the date the contribution is accepted. A report under this section is not required to be accompanied by the affidavit required under Section 254.036(h) or to be submitted on a form prescribed by the commission. A report under this section that complies with Section 254.036(a) must be accompanied by an affidavit under Section 254.036(c)(1) unless the candidate or committee has submitted an affidavit under Section 254.036(c)(1) with another report filed in connection with the election for which a report is required under this section.
- (d) To the extent of a conflict between this section and Section 254.036, this section controls.

- Sec. 254.0362. USE OF PUBLICLY ACCESSIBLE COMPUTER TERMINAL FOR PREPARATION OF REPORTS. (a) Except as provided by Subsection (d), a person who is required to file reports under this chapter may use a publicly accessible computer terminal that has Internet access and web browser software to prepare the reports.
- (b) A public entity may prescribe reasonable restrictions on the use of a publicly accessible computer terminal for preparation of reports under this chapter, except that a public entity may not prohibit a person from using a computer terminal for preparation of reports during the public entity's regular business hours if the person requests to use the computer terminal less than 48 hours before a reporting deadline to which the person is subject.
- (c) This section does not require a public entity to provide a person with consumable materials, including paper and computer diskettes, in conjunction with the use of a publicly accessible computer terminal.
- (d) An officeholder may not use a computer issued to the officeholder for official use to prepare a report under this title.
 - (e) In this section:
- (1) "Public entity" means a state agency, city, county, or independent school district.
- (2) "Publicly accessible computer terminal" means a computer terminal that is normally available for use by members of the public and that is owned by a state agency, an independent school district, or a public library operated by a city or county.

Added by Acts 1999, 76th Leg., ch. 1434, Sec. 2, eff. Sept. 1, 1999.

- Sec. 254.037. FILING DEADLINE. (a) Except as provided by Subsection (b), the deadline for filing a report required by this chapter is 5 p.m. on the last day permitted under this chapter for filing the report.
- (b) The deadline for filing a report electronically with the commission as required by this chapter is midnight on the last day for filing the report.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987. Amended by:

must be filed not later than the 30th day before the filing deadline for the first report a person is required to file under Subsection (b). A person who intends to change the manner of filing described by the person's most recent statement shall notify the commission of the change not later than the 30th day before the filing deadline for the report to which the change applies. If a person does not file a statement under this subsection, the commission may accept as authentic a report filed in any manner that complies with Subsection (b). If the commission receives a report that is not filed in the manner described by the person's most recent statement under this subsection, the commission shall promptly notify the person in writing that the commission has received a report filed in a different manner than expected.

- (j) As part of the notification required by Section 251.033, the commission shall mail the appropriate forms to each person required to file a report with the commission during that reporting period.
- (k) The commission shall prescribe forms for purposes of legislative caucus reports under Section 254.0311 that are separate and distinct from forms for other reports under this chapter.
- (1) This section applies to a report that is filed electronically or otherwise.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987; Acts 1991, 72nd Leg., ch. 304, Sec. 5.11, eff. Jan. 1, 1992; Acts 1995, 74th Leg., ch. 43, Sec. 3, eff. Aug. 28, 1995; Acts 1997, 75th Leg., ch. 1134, Sec. 6, 7, eff. Sept. 1, 1997; Acts 1999, 76th Leg., ch. 1434, Sec. 1, eff. Sept. 1, 1999; Acts 2003, 78th Leg., ch. 249, Sec. 2.12, 2.26, eff. Sept. 1, 2003.

Amended by:

Acts 2005, 79th Leg., Ch. 1225 (H.B. 1071), Sec. 1, eff. September 1, 2005.

Acts 2011, 82nd Leg., R.S., Ch. 1009 (H.B. 2359), Sec. 3, eff. June 17, 2011.

Acts 2011, 82nd Leg., R.S., Ch. 1009 (H.B. 2359), Sec. 6(3), eff. June 17, 2011.

Acts 2013, 83rd Leg., R.S., Ch. 894 (H.B. 1035), Sec. 1, eff. September 1, 2013.

- (e) A candidate for an office described by Section 252.005(5) or a specific-purpose committee for supporting or opposing only candidates for an office described by Section 252.005(5) or a measure described by Section 252.007(5) may file reports that comply with Subsection (a).
- (f) In prescribing the format of a report filed under this chapter with an authority other than the commission, the commission shall ensure that:
 - (1) a report may be filed:
- (A) by first class United States mail or common or contract carrier;
 - (B) by personal delivery; or
- (C) by electronic filing, if the authority with whom the report is required to be filed has adopted rules and procedures to provide for the electronic filing of the report and the report is filed in accordance with those rules and procedures; and
- (2) an authority with whom a report is electronically filed issues an electronic receipt for the report to the person filing the report.
 - (g) Repealed by Acts 2003, 78th Leg., ch. 249, Sec. 2.26.
- (h) Each report filed under this chapter that is not filed by electronic transfer must be accompanied by an affidavit executed by the person required to file the report. The affidavit must contain the statement: "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." Each report filed under this chapter by electronic transfer must be under oath by the person required to file the report and must contain, in compliance with commission specifications, the digitized signature of the person required to file the report. A report filed under this chapter is considered to be under oath by the person required to file the report and the person is subject to prosecution under Chapter 37, Penal Code, regardless of the absence of or a defect in the affidavit.
- (i) Each person required to file reports with the commission that comply with Subsection (b) shall file with the commission a written statement providing the manner of electronic transfer that the person will use to file the report. A statement under this subsection

computer diskette, modem, or other means of electronic transfer must be on a form prescribed by the commission and written in black ink or typed with black typewriter ribbon or, if the report is a computer printout, the printout must conform to the same format and paper size as the form prescribed by the commission.

- (b) Except as provided by Subsection (c) or (e), each report filed under this chapter with the commission must be filed by computer diskette, modem, or other means of electronic transfer, using computer software provided by the commission or computer software that meets commission specifications for a standard file format.
- (c) A candidate, officeholder, or political committee that is required to file reports with the commission may file reports that comply with Subsection (a) if:
- (1) the candidate, officeholder, or campaign treasurer of the committee files with the commission an affidavit stating that the candidate, officeholder, or committee, an agent of the candidate, officeholder, or committee, or a person with whom the candidate, officeholder, or committee contracts does not use computer equipment to keep the current records of political contributions, political expenditures, or persons making political contributions to the candidate, officeholder, or committee; and
- (2) the candidate, officeholder, or committee does not, in a calendar year, accept political contributions that in the aggregate exceed \$20,000 or make political expenditures that in the aggregate exceed \$20,000.
- (c-1) An affidavit under Subsection (c) must be filed with each report filed under Subsection (a). The affidavit must include a statement that the candidate, officeholder, or political committee understands that the candidate, officeholder, or committee shall file reports as required by Subsection (b) if:
- (1) the candidate, officeholder, or committee, a consultant of the candidate, officeholder, or committee, or a person with whom the candidate, officeholder, or committee contracts uses computer equipment for a purpose described by Subsection (c); or
- (2) the candidate, officeholder, or committee exceeds \$20,000 in political contributions or political expenditures in a calendar year.
 - (d) Repealed by Acts 2003, 78th Leg., ch. 249, Sec. 2.26.

- (c) A political contribution that is received but not accepted shall be returned to the contributor not later than the 30th day after the deadline for filing a report for the reporting period during which the contribution is received. A contribution not returned within that time is considered to be accepted.
- (d) A candidate, officeholder, or political committee commits an offense if the person knowingly fails to return a political contribution as required by Subsection (c).
 - (e) An offense under this section is a Class A misdemeanor.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987; Acts 1989, 71st Leg., ch. 2, Sec. 7.16, eff. Aug. 28, 1989.

Sec. 254.035. TIME OF MAKING EXPENDITURE. (a) For purposes of reporting under this chapter, a political expenditure is not considered to have been made until the amount is readily determinable by the person making the expenditure, except as provided by Subsection (b).

- (b) If the character of an expenditure is such that under normal business practice the amount is not disclosed until receipt of a periodic bill, the expenditure is not considered made until the date the bill is received.
- (c) The amount of a political expenditure made by credit card is readily determinable by the person making the expenditure on the date the person receives the credit card statement that includes the expenditure.
- (d) Subsection (c) does not apply to a political expenditure made by credit card during the period covered by a report required to be filed under Section 254.064(b) or (c), 254.124(b) or (c), or 254.154(b) or (c).

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987; Acts 2003, 78th Leg., ch. 249, Sec. 2.11, eff. Sept. 1, 2003.

Sec. 254.036. FORM OF REPORT; AFFIDAVIT; MAILING OF FORMS.

(a) Each report filed under this chapter with an authority other than the commission must be in a format prescribed by the commission. A report filed with the commission that is not required to be filed by

- (4) may not be made in conjunction with a solicitation for an additional political contribution.
- (d) A person must report any information required by Section 254.0612, 254.0912, or 254.1212 that is not provided by the individual making the political contribution and that the person has in the person's records of political contributions or previous reports under this chapter.
- (e) A person who receives information required by Section 254.0612, 254.0912, or 254.1212 after the filing deadline for the report on which the contribution is reported must include the missing information on the next report the person is required to file under this chapter.

Added by Acts 2003, 78th Leg., ch. 249, Sec. 2.10, eff. Sept. 1, 2003.

Sec. 254.032. NONREPORTABLE PERSONAL TRAVEL EXPENSE. A political contribution consisting of personal travel expense incurred by an individual is not required to be reported under this chapter if the individual receives no reimbursement for the expense.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987.

Sec. 254.033. NONREPORTABLE PERSONAL SERVICE. A political contribution consisting of an individual's personal service is not required to be reported under this chapter if the individual receives no compensation for the service.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987.

- Sec. 254.034. TIME OF ACCEPTING CONTRIBUTION. (a) A determination to accept or refuse a political contribution that is received by a candidate, officeholder, or political committee shall be made not later than the end of the reporting period during which the contribution is received.
- (b) If the determination to accept or refuse a political contribution is not made before the time required by Subsection (a), for purposes of this chapter, the contribution is considered to have been accepted on the last day of that reporting period.

report under this chapter is considered to be in compliance with Section 254.0612, 254.0912, or 254.1212 only if the person or the person's campaign treasurer shows that the person has used best efforts to obtain, maintain, and report the information required by those sections. A person is considered to have used best efforts to obtain, maintain, and report that information if the person or the person's campaign treasurer complies with this section.

- (b) Each written solicitation for political contributions from an individual must include:
- (1) a clear request for the individual's full name and address, the individual's principal occupation or job title, and the full name of the individual's employer; and
- (2) an accurate statement of state law regarding the collection and reporting of individual contributor information, such as:
- (A) "State law requires (certain candidates, officeholders, or political committees, as applicable) to use best. efforts to collect and report the full name and address, principal occupation or job title, and full name of employer of individuals whose contributions equal or exceed \$500 in a reporting period."; or
- (B) "To comply with state law, (certain candidates, officeholders, or political committees, as applicable) must use best efforts to obtain, maintain, and report the full name and address, principal occupation or job title, and full name of employer of individuals whose contributions equal or exceed \$500 in a reporting period.".
- (c) For each political contribution received from an individual that, when aggregated with all other political contributions received from the individual during the reporting period, equals or exceeds \$500 and for which the information required by Section 254.0612, 254.0912, or 254.1212 is not provided, the person must make at least one oral or written request for the missing information. A request under this subsection:
- (1) must be made not later than the 30th day after the date the contribution is received;
- (2) must include a clear and conspicuous statement that complies with Subsection (b);
- (3) if made orally, must be documented in writing; and

address of the person or financial institution making the loans, the full name and address, principal occupation, and name of the employer of each guarantor of the loans, the amount of the loans guaranteed by each guarantor, and the aggregate principal amount of all outstanding loans as of the last day of the reporting period;

- (3) the amount of expenditures that in the aggregate exceed \$50 and that are made during the reporting period, the full name and address of the persons to whom the expenditures are made, and the dates and purposes of the expenditures;
- (4) the total amount or a specific listing of contributions of \$50 or less accepted from persons other than caucus members and the total amount or a specific listing of expenditures of \$50 or less made during the reporting period; and
- (5) the total amount of all contributions accepted, including total contributions from caucus members, and the total amount of all expenditures made during the reporting period.
- (c) If no reportable activity occurs during a reporting period, the legislative caucus shall indicate that fact in the report.
- (d) A legislative caucus shall file with the commission two reports for each year.
- (e) The first report shall be filed not later than July 15. The report covers the period beginning January 1 or the day the legislative caucus is organized, as applicable, and continuing through June 30.
- (f) The second report shall be filed not later than January 15. The report covers the period beginning July 1 or the day the legislative caucus is organized, as applicable, and continuing through December 31.
- (g) A legislative caucus shall maintain a record of all reportable activity under this section and shall preserve the record for at least two years beginning on the filing deadline for the report containing the information in the record.
- (h) In this section, "legislative caucus" has the meaning assigned by Section 253.0341.

Added by Acts 1995, 74th Leg., ch. 43, Sec. 2, eff. Aug. 28, 1995.

Sec. 254.0312. BEST EFFORTS. (a) A person required to file a

political contribution that is received during the reporting period and the amount of which exceeds \$100;

- (11) any investment purchased with a political contribution that is received during the reporting period and the amount of which exceeds \$100;
- (12) any other gain from a political contribution that is received during the reporting period and the amount of which exceeds \$100; and
- (13) the full name and address of each person from whom an amount described by Subdivision (9), (10), (11), or (12) is received, the date the amount is received, and the purpose for which the amount is received.
- (a-1) A de minimis error in calculating or reporting a cash balance under Subsection (a) (8) is not a violation of this section.
- (b) If no reportable activity occurs during a reporting period, the person required to file a report shall indicate that fact in the report.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987; Acts 1991, 72nd Leg., ch. 304, Sec. 5.10, eff. Jan. 1, 1992; Acts 2003, 78th Leg., ch. 249, Sec. 2.091, eff. Sept. 1, 2003. Amended by:

Acts 2011, 82nd Leg., 1st C.S., Ch. 4 (S.B. 1), Sec. 76.03, eff. September 28, 2011.

- Sec. 254.0311. REPORT BY LEGISLATIVE CAUCUS. (a) A legislative caucus shall file a report of contributions and expenditures as required by this section.
 - (b) A report filed under this section must include:
- (1) the amount of contributions from each person, other than a caucus member, that in the aggregate exceed \$50 and that are accepted during the reporting period by the legislative caucus, the full name and address of the person making the contributions, and the dates of the contributions;
- (2) the amount of loans that are made during the reporting period to the legislative caucus and that in the aggregate exceed \$50, the dates the loans are made, the interest rate, the maturity date, the type of collateral for the loans, if any, the full name and

address of the person or financial institution making the loans, the full name and address, principal occupation, and name of the employer of each guarantor of the loans, the amount of the loans guaranteed by each guarantor, and the aggregate principal amount of all outstanding loans as of the last day of the reporting period;

- (3) the amount of political expenditures that in the aggregate exceed \$100 and that are made during the reporting period, the full name and address of the persons to whom the expenditures are made, and the dates and purposes of the expenditures;
- (4) the amount of each payment made during the reporting period from a political contribution if the payment is not a political expenditure, the full name and address of the person to whom the payment is made, and the date and purpose of the payment;
- (5) the total amount or a specific listing of the political contributions of \$50 or less accepted and the total amount or a specific listing of the political expenditures of \$100 or less made during the reporting period;
- (6) the total amount of all political contributions accepted and the total amount of all political expenditures made during the reporting period;
- (7) the name of each candidate or officeholder who benefits from a direct campaign expenditure made during the reporting period by the person or committee required to file the report, and the office sought or held, excluding a direct campaign expenditure that is made by the principal political committee of a political party on behalf of a slate of two or more nominees of that party;
- (8) as of the last day of a reporting period for which the person is required to file a report, the total amount of political contributions accepted, including interest or other income on those contributions, maintained in one or more accounts in which political contributions are deposited as of the last day of the reporting period;
- (9) any credit, interest, rebate, refund, reimbursement, or return of a deposit fee resulting from the use of a political contribution or an asset purchased with a political contribution that is received during the reporting period and the amount of which exceeds \$100;
 - (10) any proceeds of the sale of an asset purchased with a

ELECTION CODE

TITLE 15. REGULATING POLITICAL FUNDS AND CAMPAIGNS

CHAPTER 254. POLITICAL REPORTING

SUBCHAPTER A. RECORDKEEPING

- Sec. 254.001. RECORDKEEPING REQUIRED. (a) Each candidate and each officeholder shall maintain a record of all reportable activity.
- (b) Each campaign treasurer of a political committee shall maintain a record of all reportable activity.
- (c) The record must contain the information that is necessary for filing the reports required by this chapter.
- (d) A person required to maintain a record under this section shall preserve the record for at least two years beginning on the filing deadline for the report containing the information in the record.
- (e) A person who violates this section commits an offense. An offense under this section is a Class B misdemeanor.

Amended by Acts 1987, 70th Leg., ch. 899, Sec. 1, eff. Sept. 1, 1987.

SUBCHAPTER B. POLITICAL REPORTING GENERALLY

- Sec. 254.031. GENERAL CONTENTS OF REPORTS. (a) Except as otherwise provided by this chapter, each report filed under this chapter must include:
- (1) the amount of political contributions from each person that in the aggregate exceed \$50 and that are accepted during the reporting period by the person or committee required to file a report under this chapter, the full name and address of the person making the contributions, and the dates of the contributions;
- (2) the amount of loans that are made during the reporting period for campaign or officeholder purposes to the person or committee required to file the report and that in the aggregate exceed \$50, the dates the loans are made, the interest rate, the maturity date, the type of collateral for the loans, if any, the full name and

Exhibit R-3 Texas Election Code chapter 254 (Reporting Requirements)

- (III) rent;
- (IV) office expenses; and
- (V) computer equipment and services.
- (D) In this section, the term "political expenditures" includes direct campaign expenditures.

Credits

Source: The provisions of this §20.1 adopted to be effective December 31, 1993, 18 TexReg 9714; amended to be effective October 4, 1994, 19 TexReg 7433; amended to be effective August 6, 2006, 31 TexReg 5910; amended to be effective November 18, 2007, 32 TexReg 8305; amended to be effective September 1, 2013, 38 TexReg 5697; amended to be effective November 19, 2014, 39 TexReg 8957.

Current through 40 Tex.Reg. No. 6792, dated September 25, 2015, as effective on or before September 25, 2015

1 TAC § 20.1, 1 TX ADC § 20.1

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submission of a petition to determine whether a question or proposal is required to be submitted in an election for an expression of the voters' will. The circulation or submission of a petition to determine whether a question or proposal is required to be submitted in an election for an expression of the voters' will is considered to be an identified measure.

- (20) Principal purpose--A group has as a principal purpose of accepting political contributions or making political expenditures, including direct campaign expenditures, when that activity is an important or a main function of the group.
 - (A) A group may have more than one principal purpose.
 - (B) A group has as a principal purpose accepting political contributions if the proportion of the political contributions to the total contributions to the group is more than 25 percent within a calendar year. Whether the contributor intends to make a political contribution is determined by the reasonable expectation of the contributor as to how the contribution will be used and includes an analysis of:
 - (i) the content of the group's public statements regarding its fundraising efforts, goals, or support of or opposition to candidates, officeholders, or measures;
 - (ii) the group's government filings and organizational documents, including mission statements; and
 - (iii) the group's other activities that are unrelated to accepting political contributions or making political expenditures.
 - (C) A group has as a principal purpose making political expenditures, including direct expenditures, if the group expends more than 25 percent of its annual expenses and other resources to make political expenditures within a calendar year. The following shall be included for purposes of calculating the threshold:
 - (i) the value of the time spent by the group's employees or volunteers on activities related to making political expenditures compared to other activities; and
 - (ii) the amount of money and in-kind donations spent on political expenditures compared to other expenditures.
 - (iii) For the proportion in paragraph (2), the proportional share of administrative expenses attributable to political expenditures should be included. (For example, if the group sends three mailings a year and each costs \$10,000, if the first two are issue based newsletters and the third is a direct advocacy sample ballot, and there were no other outside expenditures, then the proportion of the administrative expenses attributable to political expenditures would be 33%.) Administrative expenses include but are not limited to:
 - (I) employee compensation and benefits;
 - (II) contractor payments;

- (14) Political committee--Two or more persons that have as a principal purpose accepting political contributions or making political expenditures to support or oppose candidates, officeholders, or measures. The term does not include a group composed exclusively of two or more individual filers or political committees required to file reports under Election Code, Title 15 (concerning Regulating Political Funds and Campaigns), who make reportable expenditures for a joint activity such as a fundraiser or an advertisement.
- (15) Political subdivision--A county, city, or school district or any other governmental entity that:
 - (A) embraces a geographic area with a defined boundary;
 - (B) exists for the purpose of discharging functions of government; and
 - (C) possesses authority for subordinate self-government through officers selected by it.
- (16) Report--Any document required to be filed by this title, including an appointment of campaign treasurer, any type of report of contributions and expenditures, and any notice.
- (17) Special pre-election report--A shorthand term for a report filed in accordance with the requirements of §§ 20.221, 20.333, or 20.435 of this title (relating to Special Pre-Election Report by Certain Candidates; Special Pre-Election Report by Certain Specific-Purpose Committees; Special Pre-Election Reports by Certain General-Purpose Committees) and § 254.038 and § 254.039 of the Election Code (relating to Special Report Near Election by Certain Candidates and Political Committees and Special Report Near Election by Certain General-Purpose Committees).
- (18) Specific-purpose committee--A political committee that does not meet the definition of general-purpose committee and that has among its principal purposes:
 - (A) supporting or opposing one or more:
 - (i) candidates, all of whom are identified and are seeking offices that are known; or
 - (ii) measures, all of which are identified;
 - (B) assisting one or more officeholders, all of whom are identified; or
 - (C) supporting or opposing only one candidate who is unidentified or who is seeking an office that is unknown.
- (19) Unidentified measure--A question or proposal that is intended to be submitted in an election for an expression of the voters' will and that is not yet legally required to be submitted in an election, except that the term does not include the circulation or

- (7) Identified measure—A question or proposal submitted in an election for an expression of the voters' will and includes the circulation and submission of a petition to determine whether a question or proposal is required to be submitted in an election for an expression of the voters' will.
- (8) In-kind contribution--A contribution of goods, services, or any other thing of value, except money, and includes an agreement made or other obligation incurred, whether legally enforceable or not, to make such a contribution. The term does not include a direct campaign expenditure.
- (9) Non-political expenditure—An expenditure from political contributions that is not an officeholder expenditure or a campaign expenditure.
- (10) Opposed candidate--A candidate who has an opponent whose name is to appear on the ballot. The name of a write-in candidate does not appear on the ballot.
- (11) Out-of-state political committee--A political committee that makes political expenditures outside Texas and in the 12 months immediately preceding the making of a political expenditure by the committee inside Texas (other than an expenditure made in connection with a campaign for a federal office or made for a federal officeholder), makes 80% or more of the committee's total political expenditures in any combination of elections outside this state and federal offices not voted on in this state. Section 20.13 of this title (relating to Out-of-State Committees) explains the practical application of this definition.
- (12) Pledge--A contribution in the form of an unfulfilled promise or unfulfilled agreement, whether enforceable or not, to provide a specified amount of money or specific goods or services. The term does not include a contribution actually made in the form of a check.

(13) Political advertising--

- (A) A communication that supports or opposes a political party, a public officer, a measure, or a candidate for nomination or election to a public office or office of a political party, and:
 - (i) is published in a newspaper, magazine, or other periodical in return for consideration;
 - (ii) is broadcast by radio or television in return for consideration;
 - (iii) appears in a pamphlet, circular, flier, billboard, or other sign, bumper sticker, or similar form of written communication; or
 - (iv) appears on an Internet website.
- (B) The term does not include an individual communication made by e-mail but does include mass e-mails involving an expenditure of funds beyond the basic cost of hardware messaging software and bandwidth.

KeyCite Yellow Flag - Negative Treatment Proposed Regulation

Texas Administrative Code
Title 1. Administration
Part 2. Texas Ethics Commission
Chapter 20. Reporting Political Contributions and Expenditures
Subchapter A. General Rules

1 TAC § 20.1 Tex. Admin. Code tit. 1, § 20.1

§ 20.1. Definitions

Currentness

The following words and terms, when used in Title 15 of the Election Code, in this chapter, Chapter 22 of this title (relating to Restrictions on Contributions and Expenditures), and Chapter 24 of this title (relating to Restrictions on Contributions and Expenditures Applicable to Corporations and Labor Organizations), shall have the following meanings, unless the context clearly indicates otherwise.

- (1) Campaign communication--The term does not include a communication made by e-mail.
- (2) Campaign treasurer.—Either the individual appointed by a candidate to be the campaign treasurer, or the individual responsible for filing campaign finance reports of a political committee under Texas law or the law of any other state.
- (3) Contribution--The term does not include a transfer for consideration of any thing of value pursuant to a contract that reflects the usual and normal business practice of the vendor.
- (4) Corporation—The term does not include professional corporations or professional associations.
- (5) Direct campaign expenditure—A campaign expenditure that does not constitute a contribution by the person making the expenditure. A campaign expenditure is not a contribution from the person making the expenditure if:
 - (A) it is made without the prior consent or approval of the candidate or officeholder on whose behalf the expenditure was made; or
 - (B) it is made in connection with a measure, but is not a political contribution to a political committee supporting or opposing the measure.
- (6) Election cycle--A single election and any related primary or runoff election.

Exhibit R-2

Texas Ethics Commission Rules - Definitions

(1. Tex. Admin. Code section 20.1)

Current through the end of the 2015 Regular Session of the 84th Legislature

End of Document

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- (B) in the 12 months immediately preceding the making of a political expenditure by the committee inside this state (other than an expenditure made in connection with a campaign for a federal office or made for a federal officeholder), makes 80 percent or more of the committee's total political expenditures in any combination of elections outside this state and federal offices not voted on in this state.
- (16) "Political advertising" means a communication supporting or opposing a candidate for nomination or election to a public office or office of a political party, a public officer, or a measure that:
 - (A) in return for consideration, is published in a newspaper, magazine, or other periodical or is broadcast by radio or television; or
 - (B) appears:
 - (i) in a pamphlet, circular, flier, billboard or other sign, bumper sticker, or similar form of written communication; or
 - (ii) on an Internet website.
- (17) "Campaign communication" means a written or oral communication relating to a campaign for nomination or election to public office or office of a political party or to a campaign on a measure.
- (18) "Labor organization" means an agency, committee, or any other organization in which employees participate that exists for the purpose, in whole or in part, of dealing with employers concerning grievances, labor disputes, wages, rates of pay, hours of employment, or conditions of work.
- (19) "Measure" means a question or proposal submitted in an election for an expression of the voters' will and includes the circulation and submission of a petition to determine whether a question or proposal is required to be submitted in an election for an expression of the voters' will.
- (20) "Commission" means the Texas Ethics Commission.

Credits

Amended by Acts 1987, 70th Leg., ch. 899, § 1, eff. Sept. 1, 1987; Acts 1991, 72nd Leg., ch. 304, § 5.01, eff. Jan. 1, 1992; Acts 2003, 78th Leg., ch. 249, § 2.01, eff. Sept. 1, 2003.

Notes of Decisions (51)

Footnotes

- Vernon's Ann. Tex. Const. Art. XVI, § 65, or Art. XI, § 11.
- V. T. C. A., Election Code § 251.001, TX ELECTION § 251.001

(B) are not reimbursable with public money.
(10) "Political expenditure" means a campaign expenditure or an officeholder expenditure.
(11) "Reportable activity" means a political contribution, political expenditure, or other activity required to be reported under this title.
(12) "Political committee" means a group of persons that has as a principal purpose accepting political contributions of making political expenditures.
(13) "Specific-purpose committee" means a political committee that does not have among its principal purposes those of general-purpose committee but does have among its principal purposes:
(A) supporting or opposing one or more:
(i) candidates, all of whom are identified and are seeking offices that are known; or
(ii) measures, all of which are identified;
(B) assisting one or more officeholders, all of whom are identified; or
(C) supporting or opposing only one candidate who is unidentified or who is seeking an office that is unknown.
(14) "General-purpose committee" means a political committee that has among its principal purposes:
(A) supporting or opposing:
(i) two or more candidates who are unidentified or are seeking offices that are unknown; or
(ii) one or more measures that are unidentified; or
(B) assisting two or more officeholders who are unidentified.
(15) "Out-of-state political committee" means a political committee that:
(A) makes political expenditures outside this state; and

- (H) the seeking of the nomination of an executive committee of a political party to fill a vacancy.
- (2) "Contribution" means a direct or indirect transfer of money, goods, services, or any other thing of value and includes an agreement made or other obligation incurred, whether legally enforceable or not, to make a transfer. The term includes a loan or extension of credit, other than those expressly excluded by this subdivision, and a guarantee of a loan or extension of credit, including a loan described by this subdivision. The term does not include:
 - (A) a loan made in the due course of business by a corporation that is legally engaged in the business of lending money and that has conducted the business continuously for more than one year before the loan is made; or
 - (B) an expenditure required to be reported under Section 305.006(b), Government Code.
- (3) "Campaign contribution" means a contribution to a candidate or political committee that is offered or given with the intent that it be used in connection with a campaign for elective office or on a measure. Whether a contribution is made before, during, or after an election does not affect its status as a campaign contribution.
- (4) "Officeholder contribution" means a contribution to an officeholder or political committee that is offered or given with the intent that it be used to defray expenses that:
 - (A) are incurred by the officeholder in performing a duty or engaging in an activity in connection with the office; and
 - (B) are not reimbursable with public money.
- (5) "Political contribution" means a campaign contribution or an officeholder contribution.
- (6) "Expenditure" means a payment of money or any other thing of value and includes an agreement made or other obligation incurred, whether legally enforceable or not, to make a payment.
- (7) "Campaign expenditure" means an expenditure made by any person in connection with a campaign for an elective office or on a measure. Whether an expenditure is made before, during, or after an election does not affect its status as a campaign expenditure.
- (8) "Direct campaign expenditure" means a campaign expenditure that does not constitute a campaign contribution by the person making the expenditure.
- (9) "Officeholder expenditure" means an expenditure made by any person to defray expenses that:
 - (A) are incurred by an officeholder in performing a duty or engaging in an activity in connection with the office; and

KeyCite Yellow Flag - Negative Treatment

Unconstitutional or Preempted Limited on Constitutional Grounds by Sylvester v. Texas Association of Business, Tex.App.-Austin, Dec. 19, 2014

KeyCite Yellow Flag - Negative Treatment Proposed Legislation

Vernon's Texas Statutes and Codes Annotated

Election Code (Refs & Annos)

Title 15. Regulating Political Funds and Campaigns (Refs & Annos)

Chapter 251. General Provisions (Refs & Annos)

Subchapter A. General Provisions (Refs & Annos)

V.T.C.A., Election Code § 251.001

§ 251.001. Definitions

Effective: September 1, 2003 Currentness

In this title:

- (1) "Candidate" means a person who knowingly and willingly takes affirmative action for the purpose of gaining nomination or election to public office or for the purpose of satisfying financial obligations incurred by the person in connection with the campaign for nomination or election. Examples of affirmative action include:
 - (A) the filing of a campaign treasurer appointment, except that the filing does not constitute candidacy or an announcement of candidacy for purposes of the automatic resignation provisions of Article XVI, Section 65, or Article XI, Section 11, of the Texas Constitution; ¹
 - (B) the filing of an application for a place on a ballot;
 - (C) the filing of an application for nomination by convention;
 - (D) the filing of a declaration of intent to become an independent candidate or a declaration of write-in candidacy;
 - (E) the making of a public announcement of a definite intent to run for public office in a particular election, regardless of whether the specific office is mentioned in the announcement;
 - (F) before a public announcement of intent, the making of a statement of definite intent to run for public office and the soliciting of support by letter or other mode of communication;
 - (G) the soliciting or accepting of a campaign contribution or the making of a campaign expenditure; and

Exhibit R-1 Texas Election Code section 251.001, et seq.

	Filing Year Won/Lost	Name	Form C/OH	Period Covered	Date Filed Debt? 2-2-42	Debt?	2-2-42	Date Filed 2-2-25	2-2-25	Date Filed
	Won	Don Zimmermar	Yes	12/7/14-12/31/14	1/15/2015 Yes		No		No	
	Won	Greg Casar	Yes	12/7/14-12/31/14	1/15/2015 Yes	Yes	No		Yes	1/15/2015
	Won	Ann Kitchen	Yes	10/26/14-12/31/14	1/15/2015 Yes	Yes	No		No	
	Won	Pio Renteria	Yes	12/7/14-12/31/14	1/14/2015 Yes	Yes	No		Yes	1/16/2015
	Lost	Jay Wiley	SӘД	10/26/14-12/31/14	1/9/2015 Yes	Yes	No		Yes	1/9/2015
	Lost	Sheryl Cole	Yes	10/26/14-12/31/14	1/15/2015 Yes	Yes	No		Yes	1/15/2015
	Lost	Mandy Dealey	Yes	12/7/14-12/31/14	1/15/2015 Yes	Yes	No		Yes	1/15/2015
	Won	Sheryl Cole	Yes	7/15/13-12/31/13	1/15/2014 No	No	No		No	
	Won	Lee Leffingwell	Yes	7/1/13-12/31/13	1/14/2014 Yes	Yes	No		No	
	Won	Chris Riley	ON				No		No	
	Won	Bill Spelman	Yes	7/1/13-12/31/13	1/14/2014 No	N _S	No		No	
	Won	Kathie Tovo	Yes	7/1/13-12/31/13	1/13/2014 Yes	Yes	No		No	
	Won	Lee Leffingwell	Yes	7/1/12-12/31/12	1/15/2013 Yes	Yes	No		No	
	Won	Chris Riley	No				No		No	
	Won	Kathie Tovo	Yes	7/1/12-12/31/12	1/15/2013 Yes	Yes	No		No	
	Won	Sheryl Cole	Yes	11/30/11-12/31/11	1/17/2012 No	No	No		No	
	Won	Bill Spelman	Yes	11/14/11-12/31/11	1/17/2012 Yes	Yes	No		Yes	1/17/2012
l										

AUSTIN CITY CLERK RECEIVED

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2015

Texas Ethics Commission

P.O. Box 12070

Austin, Texas 78711-2070

(512) 463-5800

(TDD 1-800-735-2989)

	TE / OFFICEHOLDER N FINANCE REPORT		FOR COVER SH	RM C/OH HEET PG 1
	Guide explains how to complete this form.	1 ACCOUNT # (Ethics Commission Filers)	2 Total pages file	d: 5
3 CANDIDATE / OFFICEHOLDER	MS/MRS/MR FIRST	Mi	OFFICE	USE ONLY
NAME	NICKNAME LAST KITCHEN	SUFFIX	Date Received	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX, APT / SUITE #; CITY; 2461 BRIARGROVE	STATE: ZIPCODE	Oste Hand-delivered o	r Postmerked
change of address	AUSTAN, TEXAS 787	94	Receipt #	Amount
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (514	EXTENSION	Date Processed	
6 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST KEN		Date Imaged	
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7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRE	nd as	ZIP CODE	STIN CITY C RECEIVED
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2015

Texas Ethics Commission

P.O. Box 12070

Austin, Texas 78711-2070

(512) 463-5800

(TDD 1-800-735-2989)

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The C/OH Instruction	Guide explains how to complete this form.	1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed	±: 5
3 CANDIDATE /	MS/MRS/MR FIRST	MI	OFFICE	USE ONLY
OFFICEHOLDER NAME	NICKNAME LAST KITCHEN	SUFFIX	Date Received	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE#; CITY; 2401 BRIARGRONE AUSTAN, TEXAS 7876	STATE; ZIP CODE	Date Hand-delivered or	Postmerked
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER	EXTENSION	Receipt # Date Processed	Amount
6 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST KEN NICKNAME LAST	MI	Date Imaged	2015
7 CAMPAIGN	CRAIG STREET ADDRESS (NO PO BOX PLEASE): APT/SUITE#;	CITY: STATE:	ZIP CODE	LS U
TREASURER ADDRESS (residence or business)	913B Si	ROCCO DRIVE	ZIFOODE	TIN CITY O RECEIVED N 15 AM
8 CAMPAIGN TREASURER PHONE	area code Phone number (512) 626 ~8843	EXTENSION		LERK 11 05
9 REPORT TYPE	January 15 30th day before election July 15 8th day before election	Runaff Exceeded \$500 limit	15th day after of treasurer appoin (officeholder only) Final report (Attack)	ntment
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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME	FNN KITZ	422			COUNT # (Ethics Commission Filers)
16 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOT CANDIDATE / OFFICE	ICE OF POLITICAL CONTRIBUTION OF POLITICAL C	RES MAY HAVE BEEN MADE WIT	PENDITURES MADE BY PO HOUT THE CANDIDATE'S	LITICAL COMMITTEES TO SUPPORT THE OR OFFICEHOLDER'S KNOWLEDGE OR DEIVE NOTICE OF SUCH EXPENDITURES.
	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL	COMMITTEE ADDRESS			
	SPECIFIC				
additional pages		COMMITTEE CAMPAIGN 1	REASURER NAME		
		COMMITTEE CAMPAIGN	TREASURER ADDRESS		
17 CONTRIBUTION TOTALS			FIONS OF \$50 OR LESS (NTEES OF LOANS), UNL		\$ 0.00
		POLITICAL CONTR THAN PLEDGES, LOAI	IBUTIONS NS, OR GUARANTEES OF	LOANS)	\$2,950 °%
EXPENDITURE TOTALS	3. TOTAL P	OLITICAL EXPENDITU	RES OF \$100 OR LESS, U	INLESS ITEMIZED	\$ 0.00
	4. TOTAL	POLITICAL EXPEND	DITURES		\$ 19,319,06
CONTRIBUTION BALANCE		OLITICAL CONTRIBUTI DRTING PERIOD	ONS MAINTAINED AS OF	THE LAST DAY	\$ 1,859,49
OUTSTANDING LOAN TOTALS		RINCIPAL AMOUNT OF Y OF THE REPORTING	ALL OUTSTANDING LO	ANS AS OF THE	\$43,200.00
18 AFFIDAVIT					
	AMERON G BEN Notary Public STATE OF TEX y Comm. Exp. April 6	AS .	is true and correct and me under Title 15, Ele	includes all informa	t, that the accompanying report ation required to be reported by
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Signature of officer admir	listering oath	Printed name of	rofficer administering oath	a Tit	le of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

P.O. Box 12070

SCHEDULE A

The	Instruction Guide explains how to complete this	s form.	1 Total pages Sch	redule A:
2 FILER NAME	N 1/		3 ACCOUNT # (E	thics Commission Filers)
	ANN KITCHEN		DOD60	001
4 Date	5 Full name of contributorout-of-state PAC (ID#:			8 In-kind contribution
	DAVID AND CHERYL AR	LMBRUST	contribution (\$)	description (if applicable)
10/29/14	6 Contributor address; City; State; Zip Code 2807 RECENTS PARK		\$50.00	
	AUSTIN, TX 78741		(If travel outside	of Texas, complete Schedule T)
9 Principal occur	pation / Job title (See Instructions)	10 Employer (See		1505
	VEY / PSYCHOLOGIST	MILMBRUS	T & BROWN	/ SEUF
Date	Full name of contributor Out-of-state PAC(ID#_)	Amount of contribution (\$)	In-kind contribution description (if applicable)
1.1.111	KUBBIS AND IOM MUSLS	네	,	, , , , , , ,
11/1/19	ROBBIE AND TOM AUSLS CONTRIBUTOR ADDRESS: City: State: Zip Code 3707 LAUREL LEDGE LA	NE	\$100.00	
	AUSTIN, TX 78731			
Principal occur	pation / Job title (See Instructions)	Employer (See I		of Texas, complete Schedule T)
	TIRED	RETI		
Date	Full name of contributor		Amount of	In-kind contribution
	VALINDA BOLTON		contribution (\$)	description (if applicable)
11/3/14	·		\$50.00	
	AUSTIN, TX 78749		(If travel outside	of Texas, complete Schedule T)
	pation / Job title (See Instructions)	Employer (See I	nstructions)	
COV	MMUNITY AFFAIRS	STAT	E OF TEX	AS
Date	Full name of contributor	· · · · · · · · · · · · · · · · · · ·	Amount of contribution (\$)	In-kind contribution description (if applicable)
	PETER CESARO		Sommibunor (4)	description (if applicable)
11/4/14	Contributor address; City; State; Zip Code		\$25.00	
' '	PETER CESARO Contributor address: City: State: Zip Code 54 RAINEY ST. APT	713	9 20100	
	AUSTIN, TX 78701		المتناف المساحد المساحد المساحد المساحد	es Tauras acamalata Cabadula Ti
Principal occup	pation / Job title (See Instructions)	Employer (See I		of Texas, complete Schedule T)
A	TTERNEY	51	DHM	
Date	Full name of contributor out-of-state PAC (ID#		Amount of	In-kind contribution
	GEORGE COFER		contribution (\$)	description (if applicable)
11/4/14	Contributor address; City; State; Zip Code		4	
	3306 GENTRY DR		φ25.00	
		3746	If traval autoids	of Toyae complete Schodula Ti
Principal occup	ation / Job title (See Instructions)	Employer (See I		of Texas, complete Schedule T)
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	ATTACH ADDITIONAL COPIES O	F THIS SCHEDULE	AS NEEDED	

If contributor is out-of-state PAC, please see instruction guide foradditional reporting requirements.

P.O. Box 12070

	CAL CONTRIBUTIONS THAN PLEDGES OR LOAD	NS		SCHEDULE A
The	Instruction Guide explains how to complete this	s form.	1 Total pages Sch	nedule A: H
2 FILER NAME	ANN KITCHEN		3 ACCOUNT # (E	ithics Commission Filers)
4 Date	5 Full name of contributorout-of-state PAC(ID#:		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
11/4/14	LAWRENCE COLLINS 6 Contributor address; City; State; Zip Code 2017 TILLOTSON AVE	· · · · · · · · · · · · · · · · · · ·	\$350.00	
	AUSTIN, TX 78702		(If travel outside	I of Texas, complete Schedule T)
	pation / Job title (See Instructions) GOV'T RELATIONS	10 Employer (See SELF	Instructions)	
Date	Full name of contributor 🛮 out-of-state PAC(ID#_		Amount of contribution (\$)	In-kind contribution description (if applicable)
10/27/14	TIOS PACK SADVICE PA	4\$\$	\$100,00	
	AUSTIN, TX 78745		(If travel outside o	of Texas, complete Schedule T)
Principal occur	pation / Job title (See Instructions) PRAISR	Employer (See)		
Date	Full name of contributor out-of-state PAC(ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/27/14	THE PARTICULAR.		\$100,00	
	Austin, TX 78703			l of Texas, complete Schedule T)
	eation / Job title (See Instructions) ETIRED	Employer (See I		
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/29/14	Contributor address; City; State; Zip Code 908 BLMS BONNET LN		\$50,00	
	AUSTIN, TX 78704	·		
	ation / Job title (See Instructions) ZETIRED	Employer (See I	nstructions)	of Texas, complete Schedule T)
Date	Full name of contributor out-of-state PAC (ID#:		Amount of	In-kind contribution
11/3/14	PAMELA MADERE Contributor address; City: State; Zip Code 4207 BENNEDICT LN		\$25,00	description (if applicable)
	AUSTIN, TX 78746		(If trough outside o	of Texas, complete Schedule T)
	ation / Job litte (See Instructions)	Employer (See I	nstructions)	r jezas, complete scriedale ()
	ATTACH ADDITIONAL COPIES O		AS NEEDED	requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME			3 ACCOUNT# (E	Ethics Commission Filers)
A.	NN KITCHEN		0000	000
4 Date	5 Full name of contributor out-of-state PAC (ID#:		7 Amount of contribution (\$)	8 In-kind contribution
, ,	CHARLIE MADERE		Counting (2)	description (if applicable)
11/3/14	6 Contributor address; City; State: Zip Code 4207 BENNEDICT LN		\$25.00	
	Austin, TX 78746		(If travel outside	t of Texas, complete Schedule T)
	pation / Job title (See Instructions)	10 Employer (See	•	
<u> </u>	VSULTANT	<u> </u>	GRAPHY	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
1) 1/14	Contributor address; City; State; Zip Code 6 HEDGE LANE		\$ 350.00	
	AUSTIN, TX 78746		(If travel outside a	of Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See I	nstructions)	or result, complete constant 17
	ATTORNEY	5210SL	. LAWFIRM	
Date	Full name of contributor out-of-state PAC (ID#:		Amount of	In-kind contribution
10/30/14	RICHARD AND ALISCH SU Contributor address; City; State; Zip Code 100 CONGRESS AVE STE		\$50,00	description (if applicable)
	AUSTIN, TX 78701		(If travel outside	of Texas, complete Schedule T)
	ation / Job title (See Instructions)	Employer (See I		
}	HTORNEY	FRMBRI	15 AND BI	<u> </u>
Date	Full name of contributor out-of-state PAC (ID#:_		Amount of contribution (\$)	In-kind contribution description (if applicable)
11/3/14	Contributor address; City; State; Zip Code 5220 SCAP_BG2DUGH L	4	\$ 100,00	
	DALLAS, TX 75287		(If travel outside	of Texas, complete Schedule T)
	ation / Job title (See Instructions)	Employer (See I	nstructions)	
KEAL COT	972 DEVELOPMENT MANAGEMENT	DCARBOLO	uch lane	DEVELORMENT
Date	Full name of contributor out-of-state PAC (ID#:		Amount of contribution (\$)	In-kind contribution description (if applicable)
10/28/14	Contributor address; City; State; Zip Code 5701 TRAILRIDGE DR	, , , , , , , , , , ,	\$50,00	
	AUSTIN, TX 78731		(If travel outside of	of Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See II	nstructions)	
	PROFISSOR	MNINE	rismy of	1725/25
	ATTACH ADDITIONAL COPIES O	F THIS SCHEDULE	AS NEEDED	

If contributor is out-of-state PAC, please see Instruction guide foradditional reporting requirements.

P.O. Box 12070

	CAL CONTRIBUTIONS THAN PLEDGES OR LOAI	NS		SCHEDULE A
Ţhe	Instruction Guide explains how to complete this	s form.	1 Total pages Sch	edule A: 4
2 FILER NAME			3 ACCOUNT # (E	thics Commission Filers)
Hr	IN KITCHEN		06000	∞
4 Date	5 Full name of contributor out-of-state PAC (ID#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
11/1/14	KRISTIZ ZAMRAZIL 6 Contributor address; City; State; Zip Code 1819 PIED MONT AVE AUSTIN, TX 78757		\$50, ∞ (If travel outside o	 - of Texas, complete Schedule T)
	pation / Job title (See Instructions) Y CARE CONSULTANT	10 Employer (See	Instructions)	
Date	Full name of contributor out-of-state PAC (ID#:		Amount of	In-king contribution
Dake			contribution (\$)	description (if applicable)
11/3/14	HDR PAC Contributor address; City; State; Zip Code 8404 INDIAN HILLS PI	٠ کر	\$ 35000	
	OMAHA, NEBRASKA (B114	/If travel outside o	of Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See I	<u> </u>	r rexas, complete Scredule 17
Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
11)1)14	TRONWORKERS STATE CO Contributor address; City: State: Zip Code 3003 DAWN PR 372		\$350,00	
	GEORGETOWN TX 780	28	(If travel outside o	of Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See I		
Date	Full name of contributor oul-of-state PAC (ID#_ CWA COPE PCC		Amount of contribution (\$)	In-kind contribution description (if applicable)
11/1/14	Contributor address; City; State; Zip Code 501 3rd St. NW		\$3500	
	WASHINGTON, DC 2000	1-2760	(If travel outside o	of Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See I	nstructions)	
Date	Full name of contributor out-of-state PAC (ID#_		Amount of	In-kind contribution
10/30/14	NATIONAL ASSA OF SCHAR Contributor address; City; State; Zip Code 810 W. 14th St. AUSTW/TA 78701	L WOLKSOS PAL	\$250,00	description (if applicable)
	AUSTW/TA 78701	***		f Tours associate Colonia to To
Principal occup	ation / Job title (See Instructions)	Employer (See I		f Texas, complete Schedule T)
If c	ATTACH ADDITIONAL COPIES Contributor is out-of-state PAC, please see instr		· · · · · · · · · · · · · · · · · · ·	requirements.

P.O. Box 12070

LOANS			SCHEDULE E
The	Instruction Guide explains how to compl	lete this form.	Total pages Schedule E:
2 FILER NAME	ANN KITCHEN		ACCOUNT # (Ethics Commission Filers)
4 TOTA	AL OF UNITEMIZED LOANS:)	\$
5 Date of loan 11 3 14 6 Is lender	AHN KITCHEN] out-of-state PAC (ID#:	9 Loan Amount (\$) \$3,000
a financial Institution?	2401 BRIAR GROYE AUSTIN, TK 787	04	0 11 Maturity date 2 3 4
12 Principal occupat	ion / Job title (See Instructions)	13 Employer (See Instructions)	V
14 Description of Col	lateral	15 Check if personal funds were o	deposited into political account
16 GUARANTOR INFORMATION	17 Name of guarantor		19 Amount Guarenteed (\$)
not applicable	18 Guarantor address; City; S	State; Zip Code	
20 Principal Occupat	ion (See Instructions)	21 Employer (See Instructions)	
Date of loan	Name of lender	out-of-state PAC (ID#:	Loan Amount (\$)
10/31/14	ANN KITCHEN		\$2,000,00
Is lender a financial institution?	4	Zip Code	Interest rate
YN	Ausnu, TR 7870	4	Maturity date
Principal occupati	ion / Job title (See Instructions)	Employer (See Instructions)	
Description of Colla	ateral	Check if personal funds were de	eposited into political account
none none		×	`
GUARANTOR INFORMATION	Name of guarantor		Amount Guaranteed (\$)
not applicable	Guarantor address; City; S	tate: Zip Code	
Principal Occupati	ion (See Instructions)	Employer (See Instructions)	
If lend	ATTACH ADDITIONAL COPIE der is out-of-state PAC, please see instri	S OF THIS SCHEDULE AS NEED sction guide for additional repo	

Advadising Evpanso	EXPENDITURE CATEGORIES Gift/Awards/Memorials Expense Salaries/Wages/Co	• •		
Advertising Expense Accounting/Banking	Legal Services Solicitation/Fundraising Expense Transportation Equipment & Related Expense			
Consulting Expense Event Expense	Food/Beverage Expense Travel In District Contributions/Donations Made By Polling Expense Travel Out Of District Candidate/Officeholder/Political Committee			
Fees	Printing Expense Office Overhead/F	****		
	The Instruction Guide explains how to	· · · · · · · · · · · · · · · · · · ·		
1 Total pages Schedule F:	PHN KITCHEN	3 ACCOUNT # (Ethics Commission Filers)		
4 Date 10 27 14	7 Payee address; City; State; Zip Code	7005		
6 Amount (\$) 1	7 Payee address: City; State; Zip Code 9961 BRODIE LANG, AL			
8 PURPOSE OF	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)		
EXPENDITURE	HOVERTIDING	Check if Austin, TX. officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name DH	Office sought Office held		
Date	Payee name	4		
10/27/14	OFFICE MAX			
Amount (\$)	Payee address; City; State; Zip Code	_		
\$465.81	907 W. 5th, Ausny, 7	× 78703		
PURPOSE OF	Category (See categories listed at the top of this schedule)	Description (Iftravel autside of Texas, complete Schedule T) ヤストルイトル い		
EXPENDITURE	OPFICE OVERHEAD Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name H	Office sought Office held		
Date	Payee name			
10 27 14	OFFICE DEPOT			
Amount (\$)	Payee address; City; State; Zip Code			
# 1178.03	2101 S. LAMAR, AUSTN	TX 78704		
PURPOSE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Taxas, complete Schedule T)		
OF EXPENDITURE	OFFICE CHERLHEAD			
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name H	Office sought Office held		
Date	Payee name			
10 29 14	OFFICE DEPOT			
Amount (\$)	Payee address; City: State; Zip Code			
#714,97	2101 S. LAMAR, AUSTIN,	TX 78704		
PURPOSE	Category (See categories listed at the top of this schedule)	Description (If Iravel outside of Texas, complete Schedule T)		
OF EXPENDITURE	OFFICE OVER-HEAD	PHWTING ☐ Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name DH	Office sought Office held		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

	EXPENDITURE CATEGORIES			
Advertising Expense Accounting/Banking	Gift/Awards/Memorials Expense Salaries/Wages/Contract Labor Loan Repayment/Reimbursement Legal Services Solicitation/Fundraising Expense Transportation Equipment & Related Exp			
Consulting Expense	Food/Beverage Expense Travel In District Contributions/Donations Made By			
Event Expense Fees	Polling Expense Travel Out Of Dis Printing Expense Office Overhead/8			
	The Instruction Guide explains how to			
1 Total pages Schedule F:	2 FILER NAME HUN KITCHEN	3 ACCOUNT # (Ethics Commission Filers)		
4 Date	5 Payee name	<u> </u>		
10 29 14	OFFICE MAX 7 Payee address; City; State; Zip Code			
6 Amount (\$)		_		
\$76.37	907 W. Sth, Ausray, TX	78703		
8 PURPOSE OF	(a) Category (See categories listed at the top of this schedule)	(b) Description (if travel outside of Texas, complete Schedule T)		
EXPENDITURE	OFFICE OVERHEAD	Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name	Office sought Office held		
Date	Payee name			
10/29/14	UNITED STATES POST DAF	CE		
Amount (\$)	Payee address; City; State; Zip Code			
P1,274.00	3903 S.CONGRESS, AUST	12 TX 78704		
PURPOSE OF	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)		
EXPENDITURE	OFFICE OVER-WEAD	Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name H	Office sought Office held		
Date	Payee name			
10/30/14	OFFICE DEPOT	•		
Amount (\$)	Payee address; City; State; Zip Code			
\$ 154.79	2101 S. LAMAR, AUSTIN	TX 78704		
PURPOSE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)		
OF EXPENDITURE	OPPICE OVERHEAD	PRINTING Check if Austin, TX, officeholder living expense		
Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held		
expenditure to benefit C/O		•		
Date	Payee name			
10/30/14	OFFICE MAX			
Amount (\$)	Payee address; City: State; Zip Code			
\$ 52.64	907 W. STW, AUSTN	TX 78703		
PURPOSE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)		
OF EXPENDITURE	Office Overlyad	PRINT IN C- Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name	Office sought Office held		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

SCHEDULE F

	EXPENDITURE CATEGORIES I	FOR BOX 8(a)	
Advertising Expense	Gift/Awards/Memorials Expense Salaries/Wages/Co		
Accounting/Banking	Legal Services Solicitation/Fundrais		
Consulting Expense	Food/Beverage Expense Travel In District	Contributions/Donations Made By	
Event Expense	Polling Expense Travel Out Of Distr		
Fees	Printing Expense Office Overhead/Re		
	The Instruction Guide explains how to c	complete this form.	
1 Total pages Schedule F:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)	
X	ANN KITCHEN	(OOOOOO	
4 Date	5 Payee name		
10/31/14	Voice of the		
	RIJIN TINE 7 Payee address; City: State; Zip Code		
6 Amount (\$)		1	
#3217,34	2464 BURY DAK DR,	Austr 1874S	
8 PURPOSE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)	
OF	04	SALARM	
EXPENDITURE	SALARY, WASS, CONTRACT LABOR	Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name	Office sought Office held	
- Oxpenditure to contain ore	,,,,		
Date	Payee name		
10/31/14	ANDREW HARDWICK	•	
	Payee address; City; State; Zip Code		
Amount (\$)			
\$1945.08	2804 RID GRANDE, APT.	203, AUSHN TX 78705	
PURPOSE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)	
OF	(C 1) acc. (C 142)	SALARIN	
EXPENDITURE	SALARY, WAGES, GONTRACT LABOR	Check if Austin, TX, officeholder living expense	
Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held	
expenditure to benefit C/C		Sines sough	
Date	Payee name		
10/31/14	MACKENZIE STZGAR		
Amount (\$)	Payee address; City: State: Zip Code		
ranount (v)		_	
\$696.00	350 NORTH ST # 1406A, S	24 MARCON TX 78666	
(0 0	000 110011,0	,	
PURPOSE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texes, complete Schadule T)	
OF	CALARY BACCI COMPACE	WAGES	
EXPENDITURE	SALARY, WAGES, CONTRACT LABUR	Check if Austin, TX, officeholder living expense	
Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held	
expenditure to benefit C/O	PH .	·	
Date	Payee name		
11/5/14	GRACE KOBERSON	,	
Amount (\$)	Payee address; City; State; Zip Code	A Library Control of the Control of	
41-0	11	pt 16303, Ausnu 78741	
\$679.00	4404 2AST OLTORF M	y 10000 1 1 10 1 11	
PURPOSE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)	
OF	SALANI LIAVAS COMMAN	4)AG25	
EXPENDITURE	SALARY, WAGES, CONTRACTABLE	Check if Austin, TX, officeholder living expense	
Complete ONLY 9 discos	Candidate / Officeholder name	Office sought Office held	
Complete <u>ONLY</u> if direct expenditure to benefit C/C		Time reading	
,			
	ATTACH ADDITIONAL COPIES OF THIS S	CHEDULE AS NEEDED	

SCHEDULE F

	EXPENDITURE CATEGORIES	FOR ROX 8/a)	
Advertising Expense	Gift/Awards/Memorials Expense Salaries/Wages/C		
Accounting/Banking	Legal Services Solicitation/Fundro		
Consulting Expense	Food/Beverage Expense Travel In District	alsing Expense Transportation Equipment & Related Expense Confributions/Donations Made By	
Event Expense	Polling Expense Travel Out Of Dis		
Fees	Printing Expense Office Overhead/		
, 545	The Instruction Guide explains how to		
	The instruction dutic explains now to	complete this form.	
1 Total pages Schedule F:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)	
8	ANN KITCHEN		
4 Date	5 Payee name		
_	1		
10/3/14 6 Amount (\$)	7 Payee address; City; State; Zip Code		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
•		2 - 1 - TJ -70-5	
\$1612.94	2804 KIO GRANDE APT	- 203, AUSIN TX 78705	
71		,	
8 PURPOSE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)	
OF	20.	SALARY	
EXPENDITURE	SALARY, WALGES, CONTRACT	· _	
	LABOR	Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held	
expenditure to benefit C/C	H		
Date	Payee name		
16/31/14	GNI		
	City City City Code		
Amount (\$)	Payee address; City; State; Zip Code		
1	P.O. Bux 685008, Aust	71 TX 78168	
42000,00	T.U. DUA GOTTO) . WILL	7 10 120	
PURPOSE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)	
OF EXPENDITURE	Marie TV Grange	GENERAL CONSUMNING	
EXPERIMITORL	CONSULTING EXPENSE	Check if Austin, TX, officeholder living expense	
Complete CALLY if direct	Candidate / Officeholder name	Office sought Office held	
Complete <u>ONLY</u> if direct expenditure to benefit C/O		Office adulgiti	
expenditure to senion	•••		
Date .	Payee name		
1 i	l *	,	
11/3/14	SAGE PAYMENT JOLIA	10NS	
Amount (\$)	SAGE PAY MENT SOUT Payee address; City; State; Zip Code		
\$368,99	1750 OLD MEADON BD #	300, MCCLEAN VA 22102	
1000111	1 100 dep members / "		
	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)	
PURPOSE	Category (See categories nation at the top or this scriedule)	CREDIT CARD FESS	
OF	F555	·	
EXPENDITURE	1 003	Check if Austin, TX, officeholder living expense	
Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held	
expenditure to benefit C/O	H	·	
Date	Payee name		
11 2 1 14	OFFICE DEPOT		
112/17			
Amount (5)	Payee address; City; State; Zip Code		
4	21-1-1		
\$ 100.65	2101 S. LAMAR, AUST	WTX 78704	
110-			
PURPOSE	Category (See categories fisted at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)	
OF	And the second	OFFICE SUPPLIES	
EXPENDITURE	OFFICE OVERHEAD	Check if Austin, TX, officeholder living expense	
Complete QNLY if direct	Candidate / Officeholder name	Office sought Office held	
expenditure to benefit C/C)H		
	ATTACU ADDITIONAL CODICO OF THE	SCHEDIII E AS NEEDED	
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDOLE AS NEEDED	

SCHEDULE F

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Advertising Expense Accounting/Banking Consulting Expense	EXPENDITURE CATEGORIES Gift/Awards/Memorials Expense Salaries/Wages/C Legal Services Solicitation/Fundre Food/Beverage Expense Travel In District	ontract Labor Loan Repayment/Reimbursement aising Expense Transportation Equipment & Related Expense Contributions/Donations Made By	
Event Expense Fees	Polling Expense Travel Out Of District Candidate/Officeholder/Political Committee Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above)		
	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F:	2 FILER NAME HNW KITCHEN	3 ACCOUNT # (Ethics Commission Files	rs)
4 Date	5 Payee name Pro's Pro- H		
6 Amount (\$)	Payee address; City; State; Zip Code		
\$ 853,86	3508 S. LAMAR, Aus	97W TK 78704	
8 PURPOSE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)	
OF EXPENDITURE	EVENT EXPENSE	Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name H	Office sought Office held	
Date 11 7 14	Payee name HDP DRNZ	·	
Amount (\$)	Payee address; City; State; Zip Code		
\$73,55	MS-100 AL	KUSTA, &A 30909	
PURPOSE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)	
OF EXPENDITURE	Fers	PAYRAL FEES Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name H	Office sought Office held	
Date .	Payee name		
11/7/14	ANDREW HARDWICK	W. W. Waller	
Amount (\$)	Payee address; City; State; Zip Code		
\$75,00	2804 RIO GRANDE APT	203, AUSTWTX 78705	
PURPOSE OF	Category (See categories listed at the top of this schedule) EVENT EXPENSE	Description (If travel outside of Texas, complete Schedule T)	
EXPENDITURE		Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name H	Office sought Office held	
Date	Payee name		
11/200/201	M-T3T		
Amount (\$)	Payee address: City; State; Zip Code		
\$72.96	P.O. Box 537104, ATLAN	TA 6A 30353	
PURPOSE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)	
OF EXPENDITURE	OFFICE CHERLHEAD	CELL PHONE Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name H	Office sought Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	EXPENDITURE CATEGORIES FOR BOX 8(a) Gift/Awards/Memorials Expense Salaries/Wages/Contract Labor Legal Services Solicitation/Fundraising Expense Food/Beverage Expense Travel In District Contributions/Donations Made By Polling Expense Travel Out Of District Candidate/Officeholder/Political Committee Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F:	2 FILER NAME THN KITCHEN DDDOOOO I)
4 Date 11/12/14	France HARDWICK	
\$ 2112.25	7 Payee address: City: State: Zip Code 2804 RIO GRANDE APT 203, AUSTW TX 78705	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) SALARY Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Office hold Office held OH	
Date 114 Amount (S)	Payee name MACKEN 215 STEGAR Payee address; City: State: Zip Code	
\$276,50	350 NORTH ST # 1406 A. SAN MARCUS TX 78666	
PURPOSE OF	Category (See categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T)	
EXPENDITURE	CALARY, WARS, CONTRACT Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/O	Candidate / Office holder name Office sought · Office held	
Date Amount (S)	Payee name KRISTIN FINE Payee address; City; State; Zip Code	
\$3a	2404 BURLY OAK DR, AUSTW TX 78745	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) WAGES Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/O	Candidate / Office holder name Office sought Office held H	
Date	Payee name	
45/0,23	P.O.Box 10726, For Worst TX 76114	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PHONE CALL Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Office holder name Office sought Office held	
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED	1

P.O. Box 12070

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	EXPENDITURE CATEGORIES Gift/Awards/Memorials Expense Salaries/Wages/Co Legal Services Solicitation/Fundra Food/Beverage Expense Travel In District Polling Expense Travel Out Of Dist Printing Expense Office Overhead/F	contract Labor Loan Repayment/Reimbursement ising Expense Transportation Equipment & Related Expense Contributions/Donations Made By trict Candidate/Officeholder/Political Committee		
	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F:	2 FILER NAME HINN KITCHEN	3 ACCOUNT # (Ethics Commission Filers)		
4 Date	5 Payee name ADOBE SYSTEMS			
6 Amouth (\$) \$\frac{1}{2}\display 64	7 Payee address: City, State; Zip Code 345 PARK Av2, SAN	1052 CA 95110		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) OFFICE OVER-HZAD	(b) Description (If travel outside of Texas, complete Schedule T) SOFT WAR-{ Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name OH	Office sought Office held		
Date 12/1/14	Payee name SAGZ PAYMENT SOLU Payee address; City; State; Zip Code	etten)s		
Amount (\$)	Payee address; City; State; Zip Code			
\$141.20	1750 OLD MEADOW RD #3	00, McC12AN VA 2210Z		
PURPÖSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) CREDIT CARD F295 Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name	Office sought Office held		
Date	Payee name AT3T			
\$65.33	Payee address; City; State; Zip Code P.O. Box 537104, ATLAN	ra Ga 36353		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) CSLL PHONE Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name	Office sought Office held		
Date	Payee name			
12/17/14 Amount (5)	Payee address; City: State: Zip Code			
421.64	345 PARK ANZ, SAN C	S652 CA 95110		
PURPÓSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) OFFICE OVERUSAD	Description (If travel outside of Texas, complete Schedule T) SOFT WARS. Check if Austin, TX, office holder living expense		
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name	Office sought Office held		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

P.O. Box 12070

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	Legal Services Solicitati Food/Beverage Expense Travel In Polling Expense Travel O	Wages/Contract Labor on/Fundraising Expanse i District ut Of District verhead/Rental Expanse	Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)	
1 Total pages Schedule F:	2 FILER NAME	,	3 ACCOUNT # (Ethics Commission Filer	\$)
4 Date	5 Payee name		000000	
11/21/14	12 Eus FARCO			
6 Amount (\$)	7 Payee address; City; State; Zip	Code		
\$12,00	3949 J. LAMAR 1	Ausm 78	704	
8 PURPOSE	(a) Category (See categories listed at the top of this sche	. 1 . ,	On (If travel outside of Texas, complete Schedule T)	
OF EXPENDITURE	Accounted BANKING	· -	72RVICE 122 if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name	Office sou	ight Office held	
Date 12/18/14	Payee name		AAI A	
Amount (\$)	Payee address; City: State; Zip	Code		
\$12.00	3949 S. LAMAR A	eson Tx 7	18704	
PURPOSE	Category (See categories listed at the top of this sche	dule) Description	OF (If travel outside of Texas, complete Schedule T)	
OF EXPENDITURE	Account BANKWG	1 — '	SZRVICZ FEZ if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name H	Office sou	ight Office held	
Date	Payee name			
Amount (\$)	Payee address: City; State; Zip (Code		
PURPOSE OF	Category (See categories listed at the top of this sched	dule) Description	DDT (If travel outside of Texas, complete Schedule T)	
EXPENDITURE		Check	if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name H	Office sou	ight Office held	
Date	Payee name			
Amount (\$)	Payee address; City; State; Zip 0	Code		
PURPOSE	Category (See categories listed at the top of this sche	dule) Description	On (If travel outside of Texas, complete Schedule T)	
OF EXPENDITURE		Check	if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name H	Office sou	ight Office held	
	ATTACH ADDITIONAL COPIES O	F THIS SCHEDULE A	S NEEDED	

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2015

Texas Ethics Commission

P.O. Box 12070

Austin, Texas 78711-2070

(512) 463-5800

(TDD 1-800-735-2989)

	E / OFFICEHOLDER N 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)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST SABINO NICKNAME LAST	MI SUFFIX	OFFICE USE ONLY Date Received 25 AUSTI
4 CANDIDATE / OFFICEHOLDER MAILING ADD RESS Change of address	ADDRESS IPOBOX APTISUITE# CT 1511 HAS hell St. Austin, TX 7870	TY; STATE ZIP CODE	Date Hand-delivered or Pastmarked Y
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (512) 478	EXTENSION	Processed CO
6 CAMPAIGN TREASURER NAME	MS / MRS / MR NICKNAME	record a	Imaged
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO	2-42	DODE
8 CAMPAIGN TREASURER PHONE	AREA CODE (5/2) 189	Joint	
9 REPORT TYPE	January 15 8th day before election	on Exceeded \$500	Sith day after campaign treasurer appointment (officeholder only) Final report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year 12/7/14 THROUGH	GH 12/3/	Year / 1 4
11 ELECTION	Month ELECTION DATE Year ELECTION TYPE 12/16/2014 ELECTION TYPE Phimary	Runoff	General Special
12 OFFICE	OFFICE HELD (if any) NONE	13 OFFICE SOUGHT (ITKNOW) AUSTIN DISTRICT	City Council
- 32 NOTE:	GOTOI	PAGE 2	

2015

Texas Ethics Commission

P.O. Box 12070

Austin, Texas 78711-2070

(512) 463-5800

(TDD 1-800-735-2989)

1	TE / OFFICEHOLDER N 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)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER	MS/MRS/MR FIRST	Mi	OFFICE USE ONLY
NAME	NICKNAME LAST Più Renterin	SUFFIX	Date Received 115 AUSTI
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / POBOX; APT/SUITE#; CITY;	STATE: ZIPCODE	Date Hand-delivered or Restmarked Y
change of address	AUSTIN, TX 78702		Receipt # Amount
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (512) 478 - 6778	EXTENSION	Date Processed
6 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST CVistint NICKNAME LAST VIlde	MI SUFFIX	Date Imaged
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO POBOX PLEASE); APT/SUITE#: 902 E 200 St. Augt. A	CITY STATE: - TX 78702	ZIPCODE
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (512) 189-0309	EXTENSION	
9 REPORT TYPE	January 15 30th day before election	Runoff	15th day after campaign treasurer appointment (officeholder only)
	July 15 8th day before election	Exceeded \$500 firnit	Final report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year 12/7/14 THROUGH	Month Day 12 / 31/	Year / 1 4
11 ELECTION	ELECTION DATE Month Day Year Primary 12/16/2014	Rundl	General Special
12 OFFICE	OFFICEHELD (dany) NONE	13 OFFICE SOUGHT (ITKNOWN) AUSTIN DISTRICT	City Council
	GO TO PAG	E2	

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME			5 ACCOUNT # (Ethics Commission Filers)		
, 3,	16.20 1	io henteria	•		
16 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 OF 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.				
<i></i>	COMMITTEE TYPE COMMITTEE NAME AUSTINIA AUSTINIA FOR Equity				
	GENERAL	X GENERAL			
	SPECIFIC	1812 Centre Creek	Dr. Soite 210		
		AUSTIN TX 78754 COMMITTEE CAMPAIGN TREASURER NAME			
additional pages	·	JACK KITEMAN			
		COMMITTEE CAMPAIGN TREASURER ADDRESS 1812 Centre Crach DI	r Svite 310		
		Austin TX 78754			
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZE			
	1	POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 3150-00		
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$ 2156-98				
	4. TOTAL POLITICAL EXPENDITURES \$28,990.23				
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY \$ 13, 8 34, 34				
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF TI AY OF THE REPORTING PERIOD	\$ 1,300.0 U		
CIDAVIT	<u> </u>				
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.					
	JANNETTE SUE GOODALL Signature of Candidate or Officeholder My Commission Expires				
AFFIX NOTARY STO	July 02,	2016			
Sworn to and sub-	scribed before	me, by the said Sabins Renteria	, this the		
	of Januar		· · · · · · · · · · · · · · · · · · ·		
Danier S.	Goodson	JANUELLE S. 6000dress	Notary_		
Signature of officer admi	inistering oath	Printed name of officer administering oath	Title of officer administering oath		

(512) 463-5800

Texas Ethics Commission

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

		· · · · · · · · · · · · · · · · · · ·	:	
The	Instruction Guide explains how to complete this	form.	1 Total pages Scho	edule A:
2 FILER NAME	3 3		3 ACCOUNT# (E	thics Commission Filers)
5	16:00 Rio herteril	1		
4 Date	5 Full name of contributor aut-of-state PAC (ID#:_		7 Amount of	8 In-kind contribution
	Clifton Alexande		contribution (\$)	description (if applicable)
12/8/14	6 Contributor address; City; State; Zip Code 320/ E5P EVAN ZA CVS	114 # 3CW	200.00	
'	AUST. + TX 78758	57- <i>7</i> - 73	(If travel outside o	of Texas, complete Schedule T)
9 Principal occur	pation / Job title (See Instructions)	10 Employer (See	L	or roxad, complete constants 17
5 Finicipal occup	Attorney	Alexande	~ accordat	es
Date	Full name of contributor out-of-state PAC (ID#:	1	Amount of	In-kind contribution
,	Bruce Garrison		contribution (\$)	description (if applicable)
12/8/14	Contributor address; City; State; Zip Code 1827 Rivar C V056ing C	ir Apt D	100.00	
· .	AUST. 1 TX 7874			
Osinainal aceu	pation / Job title (See Instructions)	Employer (See		of Texas, complete Schedule T)
Principal occup	pation / dob and (occ management)			
Date	Full name of contributor out-of-state PAC (ID#_		Amount of	In-kind contribution
	Lloyd Doggett For Cong.	reas	contribution (\$)	description (if applicable)
12/10/14	Contributor address; City; State; Zip Code P. 0. Boy 58 4 3		350.00	
	Aust: ~ Tx 18763		(If travel outside	of Texas, complete Schedule T)
, i	pation / Job title (See Instructions)	Employer (See		
Longi	ess 4 AN	1/15.60	verment	
Date	Full name of contributor U out-of-state PAC (10#_ Progress Fur Austin PA	6	Amount of contribution (\$)	In-kind contribution description (if applicable)
12/12/14	Contributor address; City; State; Zip Code		350.00	
	Austin TX 78744			
		Employer (See		of Texas, complete Schedule 1)
Principal occu	pation / Job title (See Instructions)	Prus,	reas For 1	lst.z
Date	Full name of contributor out-of-state PAC(ID#_		Amount of contribution (\$)	In-kind contribution description (if applicable)
	Contributor address: City: State: Zip Code 1401 615tor Aue	1		description (ii applicable)
12/13/14	Contributor address; City; State; Zip Code		100.00	
	1401 GASTON AUR			
	Aust. N Tx 78703	•	(if travel outside	of Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See	Instructions)	
	Estate	ENG	LLAUOR	
·				

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide foradditional reporting requirements.

(TDD 1-800-735-2989)

Austin, Texas 78711-2070

The	Instruction Guide explains how to complete this fo	rm.	1 Total pages Sch	edule A:
FILER NAME			3 ACCOUNT # (E	thics Commission Filers)
	Sabiro Pia Rente	ria		•
Date	5 Full name of contributorout-of-state PAC (ID#		7 Amount of	8 in-kind contribution
. *	KA + Bobby Gregar	50 V.C.	contribution (\$)	description (if applicable
11/1	6 Contributor address; City; State; Zip Code	<i>r</i> .y	700.00	
71914	KAY + Bobby Greage 6 Contributor address; City; State; Zip Code 2939 West Lahe Cove		100.00	
	Aust: 1x 78746	• ,	(If tenum) multiplies	of Texas, complete Schedule T)
Principal occu) Employer (See I		or lexas, complete screenile 1)
_	uner	Texas d		
Date	Full name of contributor out-of-state PAC (ID#:		Amount of	In-kind contribution
, /	John Burnham		contribution (\$)	description (if applicable
2/12/14	Contributor address: City; State; Zip Code 2530 HAIV'S Blud		350.00	
, , ,	25 30 Hairis Blud	•	150,00	
	Aust. 1 X 78703	· ·	(If travel outside o	of Texas, complete Schedule T)
	pation / Job title (See Instructions)	Employer (See I		
resident	Management	Argle		
Date	Full name of contributor 🔲 out-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable
				! !
	Contributor address; City; State; Zip Gode			!
	·			
				of Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See I	nstructions)	
Date	Full name of contributor out-of-state PAC (ID#:		Amount of	In-kind contribution
		·	contribution (\$)	description (if applicabl
	Contributor address; City; State; Zip Code			1
		• •	·	
		•	/If travel outside	of Texas, complete Schedule T
Principal occu	pation / Job title (See Instructions)	Employer (See I		· · · · · · · · · · · · · · · · · · ·
				•
Date	Full name of contributor aut-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)
				1
•	Contributor address; City; State; Zip Code			1
			•	1
			······································	I of Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See I	nstructions)	
	·			
· .				

P.O. Box 12070

	EXPENDITURE CATEGORIES FOR BOX 8(a)
Advertising Expense	Gift/Awards/Memorials Expense Salaries/Wages/Contract Labor Loan Repayment/Reimbursement
Accounting/Banking	Legal Services Solicitation/Fundraising Expense Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense Travel In District Contributions/Donations Made By Polling Expense Travel Out Of District Candidate/Officeholder/Political Committee
Event Expense Fees	Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above)
,	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F:	2 FILER NAME 3 ACCOUNT # (Ethics Commission Filers)
12	Sabiro Piu Renteria
12/12/14 6 Amount (\$)	5 Payee name EMMANUEL ONVEY 7 Payee address; City; State; Zip Code
6 Amount (\$)	7 Payee address: City; State; Zip Code
558.00	2610 Whitis Ave #107 Hustin Tx 78705
8 PURPOSE	(a) Category (See categories listed at the lop of this schedule) (b) Description (If travel outside of Texas, complete Schedule 1)
OF EXPENDITURE	
EXPENDITORL	Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name Office sought Office held OH
Date	Payee name
12/22/14	Stephanie Gore
Amount (\$)	Payee address; City; State; Zip Code
143.00	2529 Rio Grande Austin Tx 78705
PURPOSE	Category (See categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T)
OF EXPENDITURE	Check if Austin, TX, afficeholder living expense
Camplete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name Office sought Office held OH
Date	Payee name
12/16/11	Charle Caralla
1417/14	UNV15 6021117
Amount (S)	Payee address; City; State; Zip Code
154.00	1601 E 5th Street #111, Austin, Tx 78702
PURPOSE	Category (See categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T)
OF EXPENDITURE	Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name Office sought Office held
	Paul no nome
Date 12/19/14	DAVI & Chin Can chan
Amount (5)	Payee address; City, State, Zip Code
1600,00	4908 Parell Poth Austin, Tx 78744
PURPOSE	Category (See categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T)
OF EXPENDITURE	Check if Austin, TX. officeholder living expense
Complete ONLY if direct	Candidate / Office holder name Office sought Office held
expenditure to benefit Ch	
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

	EXPENDITURE	CATEGORIES	FOR BOX 8(a)	· · · · · · · · · · · · · · · · · · ·	
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense The Instruction Guide	Salaries/Wages/Co Solicitation/Fundra Travel In District Travel Out Of Dist Office Overhead/R explains how to	ising Expense rict lental Expense	OTHER (enter a catego	nt & Related Expense Made By ler/Political Committee
1 Total pages Schedule F:	Sabino Pio	Renteria	•	3 ACCOUNT # (E	thics Commission Filers)
4 Date 12/19/14	S Payee name Ni'Cholas	Jazano		•	
6 Amount (\$) 1350.00	7 Payee address; City, Sta #25 Molling Dr.	ite; Zip Code	Tx 750	75	
8 PURPOSE	(a) Category (See categories listed at the top	of this schedule)	(b) Description	(If travet outside of Texas, con	nplete Schedule T)
OF EXPENDITURE	Contract 1	abor	l	ustin. TX, officeholder living	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name		Office sough	t 	Office held
Date 12/19//4	Payee name SOVAL Beck	1 h 4 n			
Amount (\$)	Payee address; City; Sta	ite; Zip Code	4		_
610.50	5338 Painted Shi	eld Dr.	Austin	Tx 7873	35
PURPOSE OF	Category (See categories listed at the lop	of this schedule)	Description	(If travel outside of Texas, con	nplete Schedule Γ)
EXPENDITURE	Contract	Labor		ustin, TX, officeholder living	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name		Office sough	t	Office held
Date	Payee name	1 1 1-			
12/19/14 Amount (\$)	Payee address; City: Sta	1ed le) te: Zip Code			1011
715.00	2817 Sclado	St. Aust	4in Tx.	78705	
PURPOSE	Category (See calegories listed at the top	of this schedule)	Description	(If travel outside of Texas, con	npinte Schedule T)
OF EXPENDITURE	Contract /	cho	Check if A	ustin, TX, officeholder living	j expenso
Complete <u>ONLY</u> if direct expenditure to benefit G/O	Candidate / Officeholder name		Office sough	t .	Office held
Dale	Payee name	,		A. Water Street, Stree	***************************************
12/18/14	MiCMAC Payee address; City; Sta	La.VOT	205		·
352.00	1/2314 Hill / nina	las Dr	leander	Tx 7860	41
PURPOSE	Category (See calogories listed at the top	o this schedule)	Description	(If travel outside of Texas, co.	mplete Schedule T)
OF EXPENDITURE	Contract 1	cho	Check if A	ustin, TX. officeholder living	g expense
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name		Office sough	l	Office held
	ATTACH ADDITIONAL CO	OPIES OF THIS	SCHEDULE AS	NEEDED	

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense	Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense	Salaries/Wages/Co Solicitation/Fundra Travel In District	intract Labor ising Expense	Loan Repayment/I Transportation Equ Contributions/Don	uipment & Related Expense ations Made By
Event Expense Fees	Palling Expense Printing Expense	Travel Out Of Dist Office Overhead/R			ceholder/Political Committee ategory not listed above)
rees	The Instruction Guide		•	•	ategory not usied above)
1 Total pages Schedule F:	2 FILER NAME	_			f # (Ethics Commission Filers)
	Sabino Pio	Renteri	a	3 200001	# (Lanca Commission Filers)
4 Date 12/18/ 1 4	5 Payee name DAVID (hin can.	Chan		
6 Amount (\$)	7 Payee address; City; Sta	te: Zip Code Austin, Tx	78744		
8 PURPOSE	(a) Category (See categories listed at the top	of this schedule)	(b) Description	(If travel outside of Tex	as, complete Schedule T)
OF EXPENDITURE	Contract L	abor	Check if	Austin, TX, officeholde	r living expense
9 Complete <u>QNLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name DH		Office soug	ht	Office held
Date	Payee name	<u> </u>			
12/18/14	MArlA (erve,	rah		
Amount (\$)	Payee address; City; Sta		r		
500,00	1511 Harkell A	ustin I	x 787	D	
PURPOSE	Category (See categories listed at the top of	of this schedule)	Description	(If travel outside of Tex	as, complete Schedule T)
OF EXPENDITURE	Calla 1	110			
	COHIACTEL	abal		Austin, TX officeholde	
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name OH		Office sougl	ht	Office held
Date	Payee name				
12/18/14	DAY CA	ab Tera	7	(
Amount (\$)	Payee address: City: Stat	e: Zip Code			
144.00			٠		
PURPOSE	Calegory (See calegories listed at the top of	of this schedule)	Description	(If travel outside of Tex	as, complete Schedule T)
OF EXPENDITURE			Check if	Austin, TX, officeholde	r living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name		Office sough	ht	Office held
Date	Payee name				
12/18/14	MeghAv	Mcc	Sair		
Amount (\$)	Payee address; City; Stat	te; Zip Code			
582-06	4613 Everest La	Austin 7	x 787	27	
PURPOSE OF	Category (See calegories listed at the top	of this schedule)	Description	t (If travel outside of Tex	as, complete Schedule T)
EXPENDITURE	(attact/)	cbd	Check if	Austin, TX. officeholde	r living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name		Office sough	ht	Office held
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

P.O. Box 12070

	EXPENDITURE CATEGORIES	FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	Gift/Awards/Memorials Expense Salaries/Wages/Co Legal Services Solicitation/Fundra Food/Beverage Expense Travel In District Polling Expense Travel Out Of Dist Printing Expense Office Overhead/R	ising Expense Transportation Equipment & Related Expense Contributions/Donations Made By rict Candidate/Officeholder/Political Committee			
	The Instruction Guide explains how to	complete this form.			
1 Total pages Schedule F:	2 FILER NAME Sabino Pio Rente	3 ACCOUNT # (Ethics Commission Filers)			
4 Date 12/17/14	5 Payee name	ervande			
6 Amount (\$)	7 Payee address; City; State; Zip Code	_			
832.00	5310 Apple Orchard Li, A	ustin, Tx 78744			
8 PURPOSE	(a) Category (See calegories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)			
OF EXPENDITURE	Contract Labor	Check if Austin, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name	Office sought Office held			
Date 12/12/14	Payee name Billy JACHSON				
Amount (\$)	Payee address: City; State; Zip Code				
. 528.00	815 W. Slaughter in #200	Austin, To 78748			
PURPOSE	Category (See categories lined at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)			
OF EXPENDITURE	Contract Labor	Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name	Office sought Office held			
Date	Payee name				
12/17/14	Arron Meno	lonza			
Amount (\$)	Payee address: City; State: Zip Code				
780.00	136 Eagle Rock Schado	Tx 76571			
PURPOSE	Category (See calegories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)			
OF EXPENDITURE	Cartract Labor	Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name H	Office sought Office held			
Date	Payee name				
12/19/14	Jue Green				
Amount (\$)	Payee address; City; State: Zip Code				
456.00	300 Crockett Austin	Texas 78/04			
PURPOSE	Category (See categories listed at the top of this schedule)	Description (If travel outs:de of Texas, complete Schedule ⊺)			
OF EXPENDITURE	(Mtscd) april	Check if Austin, TX. officeholder tiving expense			
	Candidate / Officeholder name	Office sought Office held			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

P.O. Box 12070

					RECORDING TO SECURITION OF THE SECURITIES OF THE SECURITION OF THE
	EXPENDITURE	CATEGORIES F	OR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Event Expense	Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense	Salaries/Wages/Cor Solicitation/Fundrais Travel In District Travel Out Of Distri	itract Labor ing Expense	Loan Repayment/Rein Transportation Equipm Contributions/Donation	ient & Related Expense
Fees .	Printing Expense The Instruction Guide	Office Overhead/Re explains how to c	-	OTHER (enter a categ rm.	ory not listed above)
1 Total pages Schedule F:	2 FILER NAME Salino Pio	Renter	in.	3 ACCOUNT#(Ethics Commission Filers)
4 Date 12/17/1/	5 Payee name	AVKA			
6 Amount (\$)	MARY Lb 7 Payee address; City; Sta	ate; Zip Code			
143.00	1300 Crossing Place	Austin,	Tx 78	741	
8 PURPOSE	(a) Category (See categories listed at the log	of this schedule)	(b) Description	(If Iravel outside of Texas, c	omplete Schedule T)
OF. EXPENDITURE	Contact Labor		Check if A	ustin, TX, officeholder livl	ng expense
9 Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name OH		Office sough	nt	Office held
Date + 2/17/14	Payee name MAV(e/A	Andv	re	•	
Amount (\$)		ate; Zip Code			
522.50	10 Box 1,808 1	Assint.	18102		
PURPOSE	Category (See categories listed at the top	of this schedule)	Description	(If travel outside of Texas, c	omplete Schedule T)
OF EXPENDITURE	Contract La	sbor	Check if A	ustin, TX, officeholder livi	ng expense
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name		Office sough	ıt .	Office held
Date ,	Payee name			***************************************	
12/17/14	Chris N	faertz	P 5		and the state of t
Amount (\$)'	Payee address; City; Sta	ate; Zip Code	Δ 1		
672.00	16314 Hill	Country 1	Ir. Lea	Mes, Tx,	78641
PURPOSE	Category (See calegories listed at the top	of this schedule	Description	(If travel outside of Texas, c	omplete Schedule T)
OF EXPENDITURE	Contract	Labor	CheckifA	austin, TX, officeholder livi	ng expense
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name		Office sough	nt	Office held
Dale	Payee name				
12/17/14	Gerand (30		
Amount (S) 400.00	Payee address; City; Sta	ate; Zip Code		^	
1897/201	1200 Toyla A	stin. In	7870	7	
PURPOSE OF	Calegory (See calegories listed at the top	p of this schedule)	Description	(If travel outside of Texas, o	camplete Schedule T)
EXPENDITURE	unted a	X/\		Austin, TX. officeholder livi	
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name		Office sough	it .	Office held
	ATTACH ADDITIONAL C	OPIES OF THIS S	CHEDULEAS	NEEDED	

Texas Ethics Commission	on P.O. Box 12070	Austin, Texas 78/11-2	070 (512) 463-5800	(100 1-800-735-2989)
POLITICAL	EXPENDITURES			SCHEDULE F
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense	RE CATEGORIES FO Salaries/Wages/Contr Solicitation/Fundraisin Travel In District Travel Out Of District Office Overhead/Rent uide explains how to cor	act Labor Loan Repaymer g Expense Transportation E Contributions/Do Candidate/O at Expense OTHER (enter a	at/Reimbursement equipment & Related Expense mations Made By ficeholder/Political Committee category not listed above)
1 Total pages Schedule F;	2 FILER NAME Sabino	Pio Rent	esia 3 accou	NT # (Ethics Commission Filers)
4 Date /2/15/14 6 Ambunt (\$)	7 Payee address; City:	State; Zip Code		
108.49	2701 East	7th Street	Astin Tx	
8 PURPOSE OF EXPENDITURE	(a) Category (See calegories listed at t	ne lop of this schedule; (b	Description (If travel outside of T Check if Austin, TX, officehol	,
9 Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder na DH	ame	Office sought	Office held
Date /2 / 11 / 14	Payee name / Du	aute		
Amount (5) 245.60	Payee address; City; 7901 Cameson R Auticle	d " Anstin	TX 78754	
PURPOSE OF EXPENDITURE	Category (See categories listed at t	ne top of this schedule)	Description (If travel outside of T	
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder na OH	nme	Office sought	Office held
Date 12/11/14 Amount (S)	Payee name U P S Payee address: City:	State; Zip Code		
1732.47	500 Fast 44	Street 7	8701 Austin,	Tx.
PURPOSE OF	Category (See categories listed at II	e top of this schedule)	Description (If travel outside of T	
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder na	me	Office sought	Office held
Date 12/10/14	Payee name Chech Mi	1rh Typese State: Zip Code	Aring	
Amount (\$) 1493.73	Payee address; City; 3217 N. TH 3	5 Austin Tx	78722	
PURPOSE OF	Category (See categories listed at the	top of this schedule)	Description (If travel outside of	·
Complete ONLY if direct	Candidate / Officeholder na	me	Office sought	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

P.O. Box 12070

	EXPENDITURE C	ATEGORIES	FOR BOX 8(a)		
Advertising Expense Accounting/Banking Cansulting Expense Event Expense Fees	Gift/Awards/Memorials Expense S Legal Services S: Food/Beverage Expense Ti Polling Expense Ti	alaries/Wages/Co olicitation/Fundral ravel In District ravel Out Of Distr office Overhead/Ro	intract Labor ising Expense	Loan Repayment/Re Transportation Equip Contributions/Donati Candidate/Office	ment & Related Expense
	The Instruction Guide ex	oplains how to o	omplete this fo	rm.	
1 Total pages Schedule F:	2 FILER NAME			3 ACCOUNT #	(Ethics Commission Filers)
4 Date 12/10/14	5 Payee name	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~			4 4
6 Amount (\$)	7 Payee address; City; State;	Zip Code			
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8 PURPOSE	(a) Category (See categories listed at the top of t	his schedulej	(b) Description	(If travel outside of Texas,	complete Schedule T)
OF EXPENDITURE	Contract La	bol	Check if A	Auslin, TX, officeholder li	ving expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name DH		Office sough	nt	Office held
Date	Payee name				
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Amburit (\$)	Payee address; City; State;	, Zio Code		_	,
312.00	2817 Salado Austr	n.Tx	78705	5	
PURPOSE	Category (See categories listed at the top of t	his schedule)	Description	(If travel outside of Texas.	complete Schedule T)
OF EXPENDITURE	Contract L	abor	Check if A	Austin, TX, officeholder li	ving expense
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name OH		Office sough	nt .	Office held
Date	Payee name			-	
12/9/14	Blaku Me	dley			
Amount (\$)	Payee address; City; State;	Zip Code		_	
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PURPOSE	Category (See categories listed at the top of the	nis schedule)	Description	(If travel oulside of Texas,	complete Schedule T)
OF EXPENDITURE	Contract L	abol		Austin, TX. officeholder li	
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name		Office sough	11	Office held
Date	Payee name				
12/8/14	Michael LA	VA 205	William Lawrence		
Amount (\$)	Payee address; City; State:	Zip Code			
18700	16314 Hill Country D.	r. Lean	No. Tx.	78641	
PURPOSE	Category (See calegories listed at the top of t	his schedule)	Description	(If travel outside of Texas	, complete Schedule T)
OF EXPENDITURE	Cortact Lab	or	Check if A	Austin, TX. officeholder I	ving expense
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name OH		Office sough	nt ,	Office held
	ATTACH ADDITIONAL COP	IES OF THIS S	CHEDULE AS	NEEDED	

	EXPENDITURE	CATEGORIES FO	OR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense	Salaries/Wages/Contr Solicitation/Fundralsin Travel In District Travel Out Of District Office Overhead/Rent	act Labor ig Expense	Loan Repayment/Re Transportation Equip Contributions/Donati Candidate/Office	ment & Related Expense
	The Instruction Guide			•	egory not hated above;
1 Total pages Schedule F:	2 FILER NAME				(Ethics Commission Filers)
1 Total pages conceders	The state of the s				(Cirnos Commissión Friers)
4 Date	5 Payee name				
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6 Amount (\$)	7 Payee address; City; Sta	ate; Zip Code			
275.00	5338 Kinded Shie	old Dr. Hu	Stin, Tx	78735	5
8 PURPOSE	(a) Category (See categories listed at the top	of this schedule) (b	a) Description	(If travel outside of Texas,	complete Schedulc T)
OF EXPENDITURE	Contact	Lobor	Check if A	ustin, TX, officeholder li	ving expense
9 Complete ONLY if direct expenditure to benefit C/O	. Candidate / Officeholder name		Office sough	t	Office held
Date	Payee name				
12/8/14	AAVON	rendons	SA		
Amount (\$)	Payee address; City; St.	Nendons ate; Zip Code	7.7.		
192.00	136 Frale Rock	Salado TX	1675	5/	
PURPOSE	Category (See categories listed at the top	of this schedule)	Description	(If travel outside of Texas.	complete Schedule T)
OF EXPENDITURE	·		Check if A	ustin, TX, officeholder li	ving expense
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name		Office sough	ŧ	Office held
Date	Payee name .				
12/8/14		n Hern	1.10	<i>9</i> ~	
Amount (\$)	Payee address; City; Sta	ete: Zip Code	420-		
480.06	5310 Apple acho	ad In Au	stin, Tx	18744	
PURPOSE	Category (See calegories listed at the top	o of this schedule)	Description	(If travel outside of Texas,	complete Schedule T)
OF EXPENDITURE	(mtack)	abel	Chack it o	ustin, TX. officeholder li	vina evnence
	CELLINGT L	G001			***************************************
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name		Office sough		Office held
Date,	Рауее пате	Л			
12/8/14	MAVCULA	ANdre			
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302.50	PO Box 6808 A	istin Tx 1	8707	-	
PURPOSE OF	Category (See calegories listed at the top	o of this schedule)	Description	(If travel outside of Texas	, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name		Office sough	t	Office held
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P.O. Box 12070

	EXPENDITURE CATEGORIES	FOR BOX 8(a)		
Advertising Expense Accounting/Banking Cansulting Expense Event Expense Fees	Gift/Awards/Memorials Expense Salaries/Wages/C Legal Services Solicitation/Fundra Food/Beverage Expense Travel In District Polling Expense Travel Out Of Dis Printing Expense Office Overhead/F	ontract Labor Loan Repayment/Reimbursement assing Expense Transportation Equipment & Related Expense Contributions/Donations Made By trict Candidate/Officeholder/Political Committee		
	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)		
4 Date 12/16/4	5 Payee name AMA201			
6 Amouпt (\$)	7 Payee address; City: State; Zip Code			
103.94				
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the lop of this schedule)	(b) Description (if travel outside of Texas, complete Schedule T)		
		Check if Austin, TX, officeholder living expense		
9 Camplete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name PH	Office sought Office held		
Date	Payee name	A Marian Control of the Control of t		
12/7/14	AMAZON			
Amount (\$)	Payee address; City; State: Zip Code	\.		
198.69				
PURPOSE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule 1)		
OF EXPENDITURE				
		Check if Austin. TX, officeholder fiving expense		
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name OH	Office sought Office held		
Date	Payee name	-T _		
12/8/14	Payee name Big Frag Custom Payee address; City; State; Zip Code	1-Shirts		
Amount (\$)	Payee address; City; State; Zip Code			
290.82	8300 FF 620 N. AUSTERTY 78726			
PURPOSE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)		
OF		Chack if Austin TX officeholder hung evgense		
EXPENDITURE	Condidate (Officeholder como	Office sought Office held		
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name	Office sought Office held		
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12/8/14	Payee address; City: State; Zip Code	nting		
Amount (\$)	Payee address; City; State; Zip Code			
4,657.57	3217 N. IH35787	27_		
PURPOSE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)		
OF EXPENDITURE		Check if Austin, TX. officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name DH	Office sought Office held		
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED		

Texas Ethics Commission

	N. C.	
	EXPENDITURE CATEGORIES	FOR BOX 8(a)
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	Gift/Awards/Memorials Expense Salaries/Wages/O Legal Services Solicitation/Fundr Food/Beverage Expense Travel In District Polling Expense Travel Out Of Dis Printing Expense Office Overhead/	aising Expense Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee
	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
4 Date 12/8/14 6 Amount (\$)	5 Payee name 5AM 5 C/U b 7 Payee address; City; State; Zip Code	
6 Amount (\$) 481.61	7 Payee address; City; State; Zip Code	Pd. Austin, Tx 78748
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (if fravel outside of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name	Office sought Office held
Date 12/16/14	Payee name W119721v 5 Payee address; City; State: Zip Code	
Amount (\$) /40, 44	Payee address; City; State: Zip Code	V 78745
PURPOSE OF	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
EXPENDITURE		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name OH	Office sought Office held
Date 12/16/14	Payee name Splc is Payee address: City: State: Zip Code	
Amount (\$)	Payee address: City: State: Zip Code 5775 Airpurt Pluu Acstin Tr	
PURPOSE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
OF EXPENDITURE		Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name PH	Office sought Office held
Date /2//5//4	Payee name 5 Am' > (/u/b	
107,64	Payee address; City; State; Zip Code GGOO 5 TH 35 Fa	entere Rd Astin 18748
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel autside of Texas, complete Schedule T) Check if Austin, TX. officeholder living expense
Complete ONLY if direct expenditure to benefit C/4	Candidate / Officeholder name OH	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED

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Event Expense	<u> </u>	avel Out Of Distr	rict		holder/Political Committee
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	The Instruction Guide exp	plains how to c	complete this fo	ırm.	
1 Total pages Schedule F:	2 FILER NAME			3 ACCOUNT #	(Ethics Commission Filers)
4 Dale 12/8/14	5 Payee name USPS				-
6 Amount (\$)	7 Payee address; City; State;	Zip Code			·
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8 PURPOSE	(a) Category (See categories listed at the top of this	is schedule)	(b) Description	(If travel outside of Texas,	complete Schedule T)
OF EXPENDITURE			Check if A	Austin, TX, afficeholder li	ving expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name DH		Office sough	nt	Office held
Date	Payee name		-		
12/8/14	Walgreen	•			•
7 2/8/14 Amount (\$)	Payee address, City; State;	Zip Code			
106.86	2020 East river	-side	Dr. 4	ustin Ix	78741
PURPOSE	Category (See categories listed at the top of this	is schedule)	Description	(If travel outside of Texas.	complete Schedule T)
OF EXPENDITURE	17		Check if A	Austin, TX, officeholder li	ving expense
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name DH		Office sough	nt	Office held
Date	Payee name			-	***************************************
12/2/14	H ER				
Amount (S)	Pavee address; City: State;	Zip Code			
147.36	2701 Fast 7th	Stree!	& Au	Sth. TX	78702
PURPOSE	Category (See categories listed at the top of this	is schedule)	Description	(If travel outside of Texas,	complete Schedule T)
OF EXPENDITURE			Check if	Austin, TX, officeholder li	iving expense
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name OH		Office sough		Office held
5-4-	Payee name				
12/15/14	Austin Chy	on ic	le		
Amaunt (\$)	Payee address; City; State;	Zip Code			
1545.00	49066 PO BOX A	ustin Tx	7876	5	
Ulubose	Category (See nategories listed at the top of thi	us schedule)	Description	(If travel outside of Texas	, complete Schedule T)
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EXPENDITURE			Check if	Austin, TX, officeholder li	iving expense
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name OH	L.	Office sough	nt	Office held
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P.O. Box 12070

	EXPENDITURE CATEGORIE	R EOD BOY ((a)
Advantision Company	deserve a sale in the	
Advertising Expense	Gift/Awards/Memorials Expense Salaries/Wages/	
Accounting/Banking	Legal Services Solicitation/Fund	raising Expense Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense Travel Out Of D	strict Candidate/Officeholder/Political Committee
Fees	Printing Expense Office Overhead	/Rental Expense OTHER (enter a category not listed above)
1		the same and the s
	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F:	2 FILER NAME	2 ACCOUNT # (Fibing Commission City
		3 ACCOUNT # (Ethics Commission Filers)
		*
4 Date	5 Payee name	
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1 14/17/14	FACE book	
6 Amount (\$)	7 Payee address; City, State, Zip Code	•
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266.82		
000.00		
8 PURPOSE	(a) Category (See categories listed at the top of this schedule)	(b) Donatistics (transfer of the control of the con
8 PURPOSE OF	(a) Garagory (ococategories listed at the top of this scrieditie)	(b) Description (If travel outside of Texas, complete Schedule T)
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EXPENDITURE	1	
		Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held
expenditure to benefit C/C		Office sought Office field
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Date	Payee name	
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EXPENDITURE		
EXI ENDITORE		Check if Austin, TX, officeholder living expense
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Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held
expenditure to benefit C/O	Н .	
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PURPOSE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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		Check if Austin, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held
expenditure to benefit C/O	4	Office fleta
	<u>- </u>	
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Amount (\$)	Payee address; City; State; Zip Code	
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· i	Category (See categories listed at the top of this schedule)	Description (Missing outside of Towns associate 2011)
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OF I		
EXPENDITURE		Chark if Austin TV officeholdes their assessment
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held
expenditure to benefit C/O	H · · · · · · · · · · · · · · · · · · ·	
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· .	ATTACH ADDITIONAL COPIES OF THIS	SCUEDIU E AS NEEDES
	ALIAVITADDITIONAL CUPIES OF 1815	SOUCHDIE NO MEEDED

BANK RECONCILIATION

(To be filed by candidate, officeholder or campaign committee with the January 1 contribution and expenditure report)

Name of candidate, officeholder or campaign committee: Sabint For each checking, savings or other financial institution account maintained during 20_ the following information indicated. For each additional institution, use a copy of this schedule. The name of the financial institution: Wells Type of account: Checking The beginning balance:_ The ending balance: __ Enter the following information for checks issued on that account that have not cleared by December 31: AUHIN Park 12/22/14 Foundation 50.00

	1 02000	
Date	Payee	Amount
12/17/2014	Juaquen Chinamchan	204.00
12/14/2014	Walaxeen	27.97
12/22/2014	Challonger Street	100.00
12/22/2014	House the Homeless	100.00

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

Date of receipt	Contributor	Amount
	•	

Amount of interest or dividends earned:	$-\mathscr{O}$	<u></u>	-	

Office of the City Clerk, 20.36

Revised by the Ethics Review Commission 10/16/2012

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

Date of deposit or withdrawal	Amount of deposit	Amount of withdrawal
		·

A listing of checks received that have not been deposited into any account by December 31:

Date of receipt	Contributor	Amount
/ / / /		

GOTO PAGE 2

13 OFFICE SOUGHT (If known)

Austin City Council
District 6

12 OFFICE

11/04/14

N/A

OFFICE HELD (it any)

(512) 463-5800 P.O. Box 12070 FORM C/OH CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT COVER SHEET PG 1 1 ACCOUNT# 2 Total pages filed: The C/OH Instruction Guide explains how to complete this form. 12 MS/MRS MR 3 CANDIDATE / OFFICE USE ONLY **OFFICEHOLDER** Date Received NAME NICKNAME SUFFIX W:ley ADDRESS / PO BOX; 4 CANDIDATE / **OFFICEHOLDER** 12300 Hymeadow Drive MAILING **ADDRESS** Austin, TX 78750 change of address Receipt # 5 CANDIDATE/ Date Processed OFFICEHOLDER (S12) 914-8057 PHONE CAMPAIGN Date Imaged МІ **TREASURER** NAME NICKNAME Stone STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #: CAMPAIGN STATE: ZIP CODE **TREASURER** 6403 Rusty Ridge Dr. ADDRESS (residence or business) Austin, TX 78731 AREA CODE PHONE NUMBER CAMPAIGN EXTENSION TREASURER (SI2) 454-6109 PHONE 9 REPORT TYPE 15th day after campaign January 15 30th day before election Runoff treasurer appointment (officeholder only) Exceeded \$500 Final report (Atlach C/OH - FR) July 15 8th day before election 10 PERIOD COVERED THROUGH 12/31/14 10/26/14 **ELECTION TYPE** 11 ELECTION ELECTION DATE Day General Primary Special 11/04/14 13 OFFICE SOUGHT (if known) OFFICE HELD (iteny) 12 OFFICE Austin City Council District 6 N/A **GOTO PAGE 2**

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME	Jay	w:ley	15 ACCOUNT # (Ethics Commission Filers)
16 NOTICE FROM POLITICAL COMMITTEE(S)	CANDIDATE / OFFICE	CE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MA HOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANI ES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY B	DIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR
	COMMITTEE TYPE	COMMITTEE NAME	
	SPECIFIC	COMMITTEE ADDRESS	
additional pages		COMMITTEE CAMPAIGN TREASURER NAME	
,		COMMITTEE CAMPAIGN TREASURER ADDRESS	
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THA S. LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZ	
<i></i>		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 925
EXPENDITURE TOTALS	3. TOTAL P	MIZED \$ O	
	4. TOTAL	POLITICAL EXPENDITURES	\$ 15,790.61
CONTRIBUTION BALANCE		DLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST (DRTING PERIOD	DAY \$ O
OUTSTANDING LOAN TOTALS		RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF T Y OF THE REPORTING PERIOD	\$ 35,17a.98
18 AFFIDAVIT	THOMAS A. GRAU dary Public. State of My Commission Ex November 19, 2	is true and correct and includes all me under Title 15, Election Code.	f perjury, that the accompanying report I information required to be reported by didate or Officeholder
AFFIX NOTARY STAME	P / SEAL ABOVE		
Sworn to and subs	1 1	ne, by the said	ny hand and seal of office.
Signature of officer admir	Staryly Instering dath	Thosnes A. Grover Printed name of officer administering oath	notary public Title of officer administering cath

Texas Ethics Com	mission P.O. Box 12070	Austin, Texas 7	8711-2070	(512) 463-5800	(TDD 1-800-735-2989
· ·	CAL CONTRIBUTION THAN PLEDGES (SCHEDULE A
The	Instruction Guide explains how to	complete this for	m.	1 Total pages Sch	edule A:
2 FILER NAME	Jay Wile.	~ Y		3 ACCOUNT # (E	thics Commission Filers)
4 Date	· —	ul-of-state PAC (ID#:		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
10/27	Albert Max 6 Contributor address; City; S 9001 Ryonk;	tate; Zip Code		\$100	
	Austin, TX	78717	'	(If travel outside of	of Texas, complete Schedule T)
9 Principal occup	pation / Job title (See Instructions)	16	Employer (See I	nstructions)	
Date	Full name of contributor	ul-of-state PAC (iD#:		Amount of	In-kind contribution
	Coral Noo Contributor address: City: S 6836 Austin	nan - Te	!!Y	contribution (\$)	description (if applicable)
10/28				#100	
	Austin, T>	< 787	31	if travel outside o	f Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)		Employer (See I	nstructions)	
Date	Full name of contributor	ut-of-state PAC (ID#	انــــــا	Amount of	In-kind contribution
10/38	Foster Grace Contributor address; City; S	tate Zip Code	· · · · · · · · · · · · · · · · · · ·	#as	description (if applicable)
	Austin, Ty		Į.	(If travel outside o	of Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)		Employer (See II		
Date	Full name of contributor 🔲 o	ut-of-state PAC (ID#:		Amount of	In-kind contribution
	Stephen me	Cants tate; Zip Code		contribution (\$)	description (if applicable)
10/29	4400 Com	oria La	~ e	#100	
	Austin To	<u> </u>	27	(If travel outside o	f Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)		Employer (See II	nstructions)	
Date	Full name of contributor	ut-of-state PAC (ID#:		Amount of	In-kind contribution
10/29		tiate; Zip Code	ele Ct.	contribution (\$)	description (if applicable)
	Acced:	, , , , , , , , , , , , , , , , , , , 	3 ->	,,, ,	
Principal occur	pation / Job title (See Instructions)	C / S /	Employer (See II	**************************************	f Texas, complete Schedule T)
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If c	antributor is out-of-state PAC of	essa saa Instructio	an cuide foredd	itional reporting	ronuiroments

	CAL CONTRIBUTIONS THAN PLEDGES OR LOAN	IS		SCHEDULE A
The	Instruction Guide explains how to complete this	form.	1 Total pages Sch	edule A:
2 FILER NAME	Jay Wiley		3 ACCOUNT # (E	thics Commission Filers)
4 Date	5 Full name of contributorout-of-state PAC (ID#:		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
10/29	Adam Flass 6 Contributor address; City; State; Zip Code 2400 Shink R: Us		#150	
	Austin, TX 78	732		of Texas, complete Schedule T)
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See I	Instructions)	
Date	Full name of contributor Out-of-state PAC (ID#:		Amount of contribution (\$)	In-kind contribution description (If applicable)
10/29	PO Box 10897		#50	
Bi-si-si-si-si-si-si-si-si-si-si-si-si-si	Austin TX 78		· · · · · · · · · · · · · · · · · · ·	of Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See I	nstructions)	
Date	Full name of contributor out-of-state PAC (ID#	sn PAC	Amount of contribution (\$)	In-kind contribution description (if applicable)
11/3	5817 Wilcob Roa	U, Ste. 4	#350	
	Austin, Tx 78			of Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See I	nstructions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code			
				of Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See I	nstructions)	
Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code			
				of Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See 1	nstructions)	
lf c	ATTACH ADDITIONAL COPIES OF ontributor is out-of-state PAC, please see instru			requirements.

	EXPENDITURE	CATEGORIES F	FOR BOX 8(a)		
Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Cor		Loan Repayment/Reim	bursement
Accounting/Banking	Legal Services	Solicitation/Fundral	sing Expense	Transportation Equipme	ent & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District		Contributions/Donations	
Event Expense	Polling Expense	Travel Out Of Distr			der/Political Committee
Fees	Printing Expense	Office Overhead/Re	-	OTHER (enter a categor	iry not listed above)
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4 Date	5 Payee name	7			
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					· · · · · · · · · · · · · · · · · · ·
		ATTACH ADDITIONAL COP	IES OF THIS SCHEDULE	AS NEEDED	

EXPENDITURE CATEGORIES FOR BOX 8(a)					
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The Instruction Guide explains how to complete this form.					
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4 Date	5 Payee name				
11/4	Parado Printing 7 Payee address; City; State; Zip Code 10423 Mc ICalla Place				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
#3,251.45	Austin Tx 78758				
8 PURPOSE	(a) Category (See categories listed at the to	p of this schedule)	(b) Description	(if travel outside of Texas,	complete Schedule T)
OF EXPENDITURE			Mail Pieces		
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9 Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH					
Date	Payee name				
11/6	Conquest Communications				
Amount (\$)	Conquest Communications Payee address; City; State; Zip Code				
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#392, ³⁶	Richmond	_	<u> 2329/1</u>	1	
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OF EXPENDITURE	Contract Labor		Live Phone Calls Check if Austin, TX, officeholder living expense		
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11/14	Conviction Payee address; City; St	Disi	+ = 1		4
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#950 1005 Congress Ave #430 Austin TX 78701					
	Category (See categories listed at the top	of this schedule)		(If travel outside of Texas,	complete Schedule T)
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EXPENDITURE	Contract L.	bor	Check if	Austin, TX officeholder liv	ring expense
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Amount (\$)	Payee address; City; Str	ate; Zip Code			· · · · · · · · · · · · · · · · · · ·
LIAIA Oliva Staret					
#650	Austin TX 78702				
0110000	Category (See categories listed at the to			(If travel outside of Texas,	complete Schedule T)
PURPOSE OF EXPENDITURE	Contract L	abon	W ←	Ses for Austin, TX, officeholder (iv	Staff
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name		Office sough		Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

P.O. Box 12070

SCHEDULF F

POLITICAL	EXPENDITORES		301	HEDULE I
	EXPENDITURE CA	ATEGORIES FOR BOX 6		
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	Gift/Awards/Memorials Expense Se Legal Services Sc Food/Beverage Expense Tr Polling Expense Tr Printing Expense Of	alaries/Wages/Contract Labor blicitation/Fundraising Expense avel in District avel Out Of District ffice Overhead/Rental Expense	Loan Repayment/Reimburs Transportation Equipment (Contributions/Donations M. Candidate/Officeholder/ OTHER (enter a category)	& Related Expense lade By /Political Committee
	The Instruction Guide ex	plains how to complete this	s form.	
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4 Date 11/28 6 Amount (\$)	7 Payee address; City; State;			
6 Amount (\$) #45. 47	7 Payee address; City; State; Scottsdale,			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of the	Em	lion (If travel outside of Texas, comple 1 D: 37: x If Austin, TX, officeholder living ex	bution
9 Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name	Office so		Office held
Date 12/1	Payee name Face book			
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#310.21	Menlo Park,			
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Date 12/4	Payee name Nation build Payee address; City; State;	٠.		
Amount (\$)	Payee address; City; State;	Zip Code		
#29	Los Angele	s, cA		
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Date 12/29	Payee name Payee address; City; State;			
Amount (\$)	Payee address; City; State;	Zlp Code		
#45.47	Scottsdale,	AZ		
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Texas Ethics Commission	on P.O. Box 12070	Austin, Texas 78711	1-2070 (512	2) 463-5800	(TDD 1-800-735-2989)
POLITICAL	EXPENDITURES	;			SCHEDULE F
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4 Date 10/27	5 Payee name Pay Pay 7 Payee address; City;				
6 Amount (\$)	Sea Tose				
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the found in the category)		l	fravel outside of Texas L. J.	Fee
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Date IO / 2 8 Amount (\$)	Payee name Pay	State: Zip Code			
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PURPOSE OF EXPENDITURE	Category (See categories listed at the		Tran	travel outside of Texas	
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10/28 Amount (\$)	Payee name Pay Pal Payee address; City; San Jose				
PURPOSE OF EXPENDITURE	Category (See categories listed at t	the top of this schedule)	Tran	Iravel outside of Texes	
Complete ONLY If direct expenditure to benefit C/C		ime	Office sought		Office held
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SCHEDULE F

	EXPENDITURE C	ATEGORIES I	FOR BOX 8(a))	
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4 Date /0/교 역	Jey Wiley 5 Payee name Pau Pel				
6 Amount (\$)	7 Payee address; City; State	; Zip Code			
#1.75	San Jose, a	CA			
8 PURPOSE OF	(a) Category (See categories listed at the top of	this schedule)		(If Iravel outside of Texas,	
EXPENDITURE	Fundraising			wstin, TX, officeholder in	•
9 Complete <u>QNLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name C		Office sough	nt	Office held
Date 10/29	Payee name Pay Pal				
Amount (\$)		; Zip Code			
#4.65	San Jose,	c A			
PURPOSE	Category (See categories listed at the top of	this schedule)		(If travel outside of Texas,	
OF EXPENDITURE	Fundraising			Austin, TX, officeholder liv	
Complete <u>ONLY</u> If direct expenditure to benefit C/O	Candidate / Officeholder name		Office sough	nt	Office held
Date	Payee name	-			
10/29	Pay Pal				
Amount (\$)	Payee address; City; State;	; Zip Code			,
¥1.75	San Jose,	CA			
PURPOSE	Category (See categories listed at the top of t	lhis schedule)		(If travel outside of Texas,	complete Schedule T)
OF EXPENDITURE	Fundraisin.	_		ustin, TX, afficeholder liv	✓ C C
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name	5	Office sough	***************************************	Office held
Date	Payee name				
Amount (\$)	Payee address; City, State;	Zip Code		•	
PURPOSE OF	Category (See categories listed at the top of t	(his schedule)	_	(If travel outside of Texas,	
EXPENDITURE	0-414 105 11			ustin, TX, officeholder tiv	
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name		Office sough	t	Office held
	ATTACH ADDITIONAL COP	PIES OF THIS S	CHEDULE AS	NEEDED	

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	EXPENDITURE CATEGORIES Gift/Awards/Memorials Expense Salaries/Wages/Co Legal Services Solicitation/Fundrai Food/Beverage Expense Travel In District Polling Expense Travel Out of District Printing Expense Office Overhead/R The Instruction Guide explains how to a	contract Labor Loan Repayment/Reimbursement trising Expense Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee tental Expense OTHER (enter a category not listed above)
1 Total pages Schedule G:	2 FILER NAME Jay Wiley	3 ACCOUNT # (Ethics Commission Filers)
4 Date 12/3	Local Voice Solu	ition s
6 Amount (\$) # 5 O Reimbursement from political contributions intended	3700 Thompson	51,2ct 8702
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If Iravel outside of Texas, complete Schedule T) D-+
Date 12/8	Payee name 13.6 Hall	
Amount (\$) #270 Reimbursement from political contributions intended	Payee address; City; State; Zip Code 2101 FM 972 George town, TX	78626
PURPOSE OF EXPENOITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) S: 5
Date 12/29	Payee name Thomas Graphic Payee address; City; State; Zip Code	S
Amount (\$) #622 44 Reimbursement from political contributions intended	Payee address; City; State; Zip Code 9501 N. IH 35 Austin, TX 787	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) Check if Austin, TX, officeholder living expense
Date	Payee name	
Amount (\$) Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (if travel outside of Texas, complete Schedule T) Check if Austin, TX, officeholder living expense
-	ATTACH ADDITIONAL COPIES OF THIS SO	CHEDULE AS NEEDED

CANDIDATE / OFFICEHOLDER REPORT: **DESIGNATION OF FINAL REPORT**

FORM C/OH - FR The Instruction Guide explains how to complete this form. ■ Complete only If "Report Type" on page 1 is marked "Final Report" •• 1 C/OHNAME 2 ACCOUNT # (Ethics Commission Filers) Wiley SIGNATURE I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file. Signature of Candidate / Officeholder **FILER WHO IS NOT AN OFFICEHOLDER** .. Complete A & B below only if you are not an officeholder. ... A. **CAMPAIGN FUNDS** Check only one: Ido not have unexpended contributions or unexpended interest or income earned from political contributions. I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204. B. **ASSETS** Check only one: I do not retain assets purchased with political contributions or interest or other income from political contributions. I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204. Signature of Candidate **OFFICEHOLDER** ·· Complete this section only if you are an officeholder ·· I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions. Signature of Officeholder

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

AUSTIN CITY CLERK RECEIVED

2015 JAN 9 AM 10 11

BANK RECONCILIATION

(To be filed by candidate, officeholder or campaign committee with the January 15th contribution and expenditure report)

Name of candidate, officeholder or campaign committee:								
For each checking, savings or other financial institution account maintained during 20 14, enter the following information indicated. For each additional institution, use a copy of this schedule.								
The name of the financial instit	ution: Bank of	America						
Type of account: Bo	siness Checkin							
The beginning balance:	*8,000,°°	5						
The ending balance:	Ø							
Enter the following information December 31:	for checks issued on that acco	ount that have not cleared by						
Date	Payee	Amount						
N/A								
by the contributor's financial in	stitution:	ntions and deposited but dishonored						
Date of receipt	Contributor	Amount						
NA								
Amount of interest or dividends	earned:							
Office of the City Clerk, 20.36	Revised by the	Ethics Review Commission 10/16/2012 Page 1 of 2						

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

Date of deposit or withdrawal	Amount of deposit	Amount of withdrawal
NIA		

A listing of checks received that have not been deposited into any account by December 31:

Date of receipt	Contributor	Amount		
N/A				

Texas Ethics Commission	P.O. Box 12070 Austin, Texas	s 78711-2070	(512)463-5800 TDD 1-800-735-2989			
	OFFICEHOLDER INANCE REPORT		FORM C/OH COVER SHEET PG 1			
The C/OH Instruction Gu	IDE EXPLAINS how to complete this form.	1 ACCOUNT # (Ethics Commission filers) 00000010	2 PAGE# 1 of #9 3.5			
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR FIRST	М	OFFICE USE ONLY			
NAME	Gregorio		Date Received C			
	NICKNAME LAST Casar	SUFFIX	Date Received URN 15 PM			
4 CANDIDATE / OFFICEHOLDER MAILING	ADDRESS / PO BOX. APT / SUITE #: P.O. Box 180941	10				
ADDRESS	Austin, TX 78718	to leco	d or Date Postmarked			
Change of Address		of film	02			
5 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST Teofilo	0 0 11	Amount			
IAUAIC	NICKNAME LAST Teo Tijerina	at any				
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE): 1201 Tinnin Ford Austin, TX 78741	point				
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (512) 964-2843	EXTENSION				
8 REPORT TYPE	X January 15 30th day before	election Runoff	15th day after campaign treasurer appointment (officeholder only)			
	July 15 8th day before a	election Exceeded \$500 limit	Final report (Attach C/OH - FR)			
9 PERIOD COVERED	Month Day Year	Month Day	Year			
	12/07/2014	12/31/20	014			
10 ELECTION	ELECTION DATE ELECTION DATE STREET Pr 12/16/2014	on TYPE filmary X Runoff	General Special			
11 OFFICE	OFFICE HELD (If any)	12 OFFICE SOUGHT (if known City Council, Distric	**			
GO TO PAGE 2						

GO TO PAGE 2

Electronic Filing Version 3.4.6

CANDIDATE SUPPORT &		OLDER REPORT:	Co		RM C/OH SHEET PG 2
13 C/OH NAME Casa	r, Gregorio		14 ACCOU		hics Commission filers)
15 NOTICE FROM	have been made with	olice of political expenditures by political committees to support the ca nout the candidate's or officeholder's knowledge or consent. Candidat by receive notice of such expenditures			
POLITICAL COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME Austin Firefighters Public Safety Fund			1
	GENERAL	COMMITTEE ADDRESS 7537 Cameron Rd. Austin, TX 78752			
	SPECIFIC				
additional pages	= ==	COMMITTEE CAMPAIGN TREASURER ADDRESS 7537 Cameron Rd. Austin, TX 78752			<u> </u>
16 CONTRIBUTION TOTALS	,	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED		\$	760.00
# %		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$	15,010.00
EXPENDITURE 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED TOTALS			D	\$	440.05
	4. TOTAL	POLITICAL EXPENDITURES		\$	35,873.49
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE AY OF THE REPORTING PERIOD		\$	15,595.99
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE AY OF THE REPORTING PERIOD		\$	5,025.00
AFFIX NOTARY Sworn to and subscrit	1	s of Texas Expires 15 Shanature of Co	all informatio	Officeholds	to be reported by
of Manual Signature of difficer adm	112	SUSAC Harm Print name of officer administering oath	Title of offic	Nota	~r/

CANDIDATE / OFFICEHOLDER REPORT

C/OH NAME Casar,	Gregorio			ACCOUNT # (Ethics Commission filers
			_ = = = = =	00000010
17 NOTICE FROM POLITICAL	have been made with		ceholder's knowledge or consent. Can	he candidate / officeholder. These expenditures ma ididates and officeholders are required to report this
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME	Austin Police Association PA	AC .
	X GENERAL	COMMITTEE ADDRESS	5817 Wilcab Rd. Austin, TX 78721	
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME	Escobar, Valencia	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	5817 Wilcab Rd. Austin, TX 78721	
NOTICE FROM POLITICAL	have been made with		ceholder's knowledge or consent. Can	he candidate / officeholder. These expenditures ma ndidates and officeholders are required to report this
COMMITTEE(S)	COMMITTÉE TYPÉ	COMMITTEE NAME	Austinites for Equity	7. 172
	GENERAL	COMMITTEE ADDRESS	1812 Centre Creek Dr. St.e 310 Austin, TX 78754	
	X SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME	Kirkfman, Jack	rests to the second
		COMMITTEE CAMPAIGN TREASURER ADDRESS	15408 Interlachen Dr. Austin, TX 78717	
NOTICE FROM POLITICAL	have been made with		ceholder's knowledge or consent. Car	the candidate / officeholder. These expenditures mandidates and officeholders are required to report this
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME	Slerra Club Political Commit	tee of Texas ·
	X GENERAL	COMMITTEE ADDRESS	615 Willow San Antonio, TX 78202	
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME	Gonzalez, Hector	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	615 Willow San Antonio, TX 78202	
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			¥	

						KI M OTO THE ISE		
	The INSTRUCTION	אר Guide explains how to com	plete this form.		1 PAGE # Schedule: 1/10 Report: 4/29			
2	FILER NAME	Casar, Gregorio	_1== 170		3 ACCOUNT # 00000010	(Ethics Commission filers)		
4	Date	5 Full name of contributor Arndt, Thomas	out-of-state PAC (ID#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	12/15/2014	6 Contributor address; 19907 Kennemer Drive Pflugerville, TX 78660	City; State; Zip Code		\$350.00			
					(If travel outside of	Texas, complete Schedule T)		
9	Principal occup President	nation / Job title (See Instruction	ns)	10 Employer (See In Dannenbaum E		9		
	Date	Full name of contributor Briggle & Polan PLLC	out-of-state PAC (ID#	2 = 6 - 10	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/07/2014	Contributor address; 812 San Antonio Street Suite 310	City; State; Zip Code		\$350.00			
		Austin, TX 78701	190-7			Texas, complete Schedule T)		
_	Principal occup	eation / Job title (See Instruction	ns)	Employer (See In	structions)	360		
	Date	Full name of contributor Bunch, William	ut-of-state PAC (ID#	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/09/2014	Contributor address; 1307 Oxford Ave Austin, TX 78704-2825	City; State; Zip Code		\$150.00			
					(If travel outside of	Texas, complete Schedule T)		
	Principal occup	pation / Job title (See Instruction	ns) zamilan zami	Employer (See In	structions)	1		
	Date	Full name of contributor Cash, Robert	out-of-state PAC (ID#	*	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/10/2014	Contributor address; 7000 Timarou Terrace Austin, TX 78754	City; State; Zip Code		\$100.00	[
_					(If travel outside of	Texas, complete Schedule T)		
	Principal occup	pation / Job title (See Instruction	ns)	Employer (See In	structions)			
	Date	Full name of contributor Celauro, F. Paul	out-of-state PAC (ID)	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/14/2014	Contributor address; 5326 McCulloch Circle Houston, TX 77056	City; State; Zip Code		\$350.00	i i i		
					(If travel outside of	Texas, complete Schedule T)		
Г		pation / Job title (See Instruction	ns)	Employer (See In		1		
	Engineer			Dannenbaum E	ngineering			

	The Instruction	N Guide explains how to com	plete this form.		1 PAGE # Schedule: 2/1	10 Report: 5/29		
2	FILER NAME	Casar, Gregorio			3 ACCOUNT# 00000010	(Ethics Commission filers)		
4	Date	5 Full name of contributor Dannenbaum, James	out-of-state PAC (ID#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	12/15/2014	6 Contributor address; 3100 W. Alabama Street Houston, TX 77098	City; State; Zip Code		\$350.00			
	all .	- A 11 A- D 1			(If travel outside of	Texas, complete Schedule T)		
9		ation / Job title (See Instruction Division Manager	ns)	10 Employer (See In Dannenbaum E				
	Date	Full name of contributor DePalma, Richard	out-of-state PAC (ID#	*	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/09/2014	Contributor address; 7821 Wisteria Valley Dr Austin, TX 78739-1993	City; State; Zip Code		\$100.00	 		
						·		
<u> </u>	Principal accur	ation / Job title (See Instruction	200	Employer (See In		Texas, complete Schedule T)		
	- micipal occup	adon 7 300 tide (See Instruction	15)	Employer (See in	su delions)			
-	Dale	Full name of contributor Dunaway, Scott	out-of-state PAC (ID#	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
·	12/09/2014	Contributor address; 2104 Forest Trail Austin, TX 78703	City; State; Zip Code		\$350.00			
Ţ	P ======				(If travel outside of	Texas, complete Schedule T)		
	Principal occup President	ation / Job title (See Instruction	ns)	Employer (See In Dunaway Public				
	Date	Full name of contributor Escamilla, David	out-of-state PAC (ID)	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/13/2014	Contributor address; 5703 Spurflower Dr Austin, TX 78759-7162	City; State; Zip Code	•••••	\$100.00			
					<u> </u>	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instruction	ns)	Employer (See In	structions)			
	Date	Full name of contributor Forbath, William	out-of-state PAC (ID:	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/12/2014	Contributor address; 3206 Greenlee Dr Austin, TX 78703-1622	City; State; Zip Code	- I	\$350.00	Para di managa		
	116 265				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Professor of I	ation / Job title (See Instruction aw	ns)	Employer (See In UT Austin	istructions)			

		THAIT LEBOLO ON LOAD	10		1
	The Instruction	אס Guide explains how to complete this form.		1 PAGE # Schedule: 3/1	0 Report: 6/29
2	FILER NAME	Casar, Gregorio		3 ACCOUNT # 00000010	(Ethics Commission filers)
4	Date	5 Full name of contributor)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	12/07/2014	6 Contributor address; City; State; Zip Code PO Box 140028 Austin, TX 78714		\$350.00	e trugs
		and the same		(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	iu
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/07/2014	Contributor address; City; State; Zip Code 2501 Stratford Drive Austin, TX 78746		\$350.00	
				- 25 10	Texas, complete Schedule T)
	Principal occup Partner	ation / Job tille (See Instructions)	Employer (See In George Brother	structions) s Kincaid & Horton	n LLP
	Date	Full name of contributor ut-of-state PAC (ID# Gregory, Bobby	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/17/2014	Contributor address; City; State; Zip Code 2939 Westlake Cv Austin, TX 78746-1961		\$350.00	
		- Links Links		(If travel outside of	Texas, complete Schedule T)
	Principal occup Owner/CEO	ration / Job title (See Instructions)	Employer (See In Texas Disposal		
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/17/2014	Contributor address; City; State; Zip Code 2939 Westlake Cv Austin, TX 78746-1961		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Homemaker	ation / Job title (See Instructions)	Employer (See In None	structions)	
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/09/2014	Contributor address; City; State; Zip Code 8 Winston Woods Drive Houston, TX 77024		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occur	L pation / Job title (See Instructions)	Employer (See in		, ,
	Chairman		Texas Taxi Inc		

	OTTLK	THAN PLEDGES OR LOA	1143		
	The Instruction	N Guide explains how to complete this form.		1 PAGE # Schedule: 4/1	0 Report: 7/29
2	FILER NAME	Casar, Gregorio		3 ACCOUNT # 00000010	(Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (III Harter, Suzanne	D#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	12/09/2014	6 Contributor address; City; State; Zip Code 8 Winston Woods Drive Houston, TX 77024		\$350.00 	
				(if travel outside of	Texas, complete Schedule T)
9	Principal occup Homemaker	ation / Job title (See Instructions)	10 Employer (See In None	structions)	
	Date	Full name of contributor	D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
i	12/13/2014	Contributor address; City; State; Zip Code 3307 Winding Creek Dr Austin, TX 78735-1474	-	\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Healthcare A	oation / Job title (See Instructions) dministration	Employer (See In Seton Healthca		
	Date	Full name of contributor ut-of-state PAC (II Herring, Charles	D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/07/2014	Contributor address; City; State; Zip Code 1204 Castle Hill Street Austin, TX 78703	3	\$350.00	
		M			Texas, complete Schedule T)
	Principal occup Attorney	pation / Job title (See Instructions)	Employer (See In Herring & Irwin		
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/11/2014	Contributor address; City; State; Zip Code 4801 Main Street Suite 1000 Kansas City, MO 64112		\$350.00	
		entra collar or tot		(If travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See In	nstructions)	
	Date	Full name of contributor	D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/10/2014	Contributor address; City; State; Zip Code 111 Congress Avenue Suite 1400	3	\$350.00	
		Austin, TX 78701			
	Orinoinal assura	nation / Joh tillo /Con Instructions)	Employee/Oct-1	<u> </u>	Texas, complete Schedule T)
	enncipal occu p	pation / Job tille (See Instructions)	Employer (See In	istructions)	

		· · · · · · · · · · · · · · · · · · ·				
	The Instruction	N Guide explains how to complete	this form.	====	1 PAGE # Schedule: 5/1	0 Report: 8/29
2	FILER NAME	Casar, Gregorio			3 ACCOUNT# 00000010	(Ethics Commission filers)
4	Date	5 Full name of contributor	out-of-state PAC (ID#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	12/12/2014	6 Contributor address; City; 8834 Honeysuckle Trail Austin, TX 78759	State; Zip Code		\$350.00	
					(If travel outside of	Texas, complete Schedule T)
9	Principal occup President	ation / Job title (See Instructions)		10 Employer (See in: Greater Austin	structions) Fransportation Co	mpany
	Date	Full riame of contributor Keene, Russell	out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/08/2014	Contributor address; City; 2600 Maria Anna Road Austin, TX 78703	State; Zip Code		\$350.00	
		100 mars - 218 m			(If travel outside of	Texas, complete Schedule T)
	Principal occup Manager	ation / Job title (See Instructions)		Employer (See in Crossnore Grou	structions)	
	Date	Full name of contributor Larson-Richard, Mara	out-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/08/2014	Contributor address; City 507 Pressler St Apt 4132 Austin, TX 78703-5192	; State; Zip Code		\$100.00	Texas, complete Schedule T)
H	Principal occup	pation / Job litle (See Instructions)		Employer (See In	<u> </u>	
						111-
	Date	Full name of contributor Leonard, Linda	out-of-state PAC (IDI	#) 🗔	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/11/2014	Contributor address; City 7122 Royal Ln Dallas, TX 75230-3608	; State; Zip Code		\$350.00	I I I
		AND			(If travel outside of	Texas, complete Schedule T)
	Principal occup Homemaker	pation / Job title (See Instructions)		Employer (See In None	structions)	re a production
	Date	Full name of contributor Leonard, Robert	out-of-state PAC (ID)	 	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/11/2014	Contributor address; City 7122 Royal Ln Dallas, TX 75230-3608	; State; Zip Code	e e	\$350.00	
厂	Principal occup	pation / Job title (See Instructions)		Employer (See In	structions)	
	Chairman			Force Multiplier	Solutions, Inc.	

	The Instruction	N GUIDE explains how to com	plete this form.		1 PAGE#	10 Report: 9/29
2	FILER NAME	Casar, Gregorio	3		3 ACCOUNT # 00000010	(Ethics Commission filers)
4	Date	5 Full name of contributor Lewis, Fred & Dawn	□ out-of-state PAC (ID#	9_)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	12/09/2014	6 Contributor address; 4509 Edgemont Dr Austin, TX 78731-5223	City; State; Zip Code		\$200.00	
9		eation / Job title (See Instruction cutive; Attorney	99)	16 Employer (See In Texans Togeth	structions)	Texas, complete Schedule T)
	Date	Full name of contributor Martinez, Diana	□ out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/11/2014	Contributor address; 510 E 7th St Houston, TX 77007	City; State; Zip Code		\$350.00	I I
		and the same of			(If travel outside of	Texas, complete Schedule T)
	Principal occup Homemaker	eation / Job title (See Instruction	is)	Employer (See In None		
=	Date	Full name of contributor Martinez, Roman	☐ out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/11/2014	Contributor address; 510 E 7th St Houston, TX 77007	City; State: Zip Code		\$350.00	La care de
14		- m t			(If travel outside of	Texas, complete Schedule T)
	Principal occup President/CE	pation / Job title (See Instruction O	es)	Employer (See In Texas Taxi Inc	nstructions)	THE RESERVE OF THE PARTY OF THE
	Date	Full name of contributor McRae, Pete	out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/10/2014	Contributor address; 915 S College St Georgetown, TX 78626-6018	City; State; Zip Code		\$350.00	
					(If travel outside of	Texas, complete Schedule T)
	Principal occup Advocacy	ation / Job title (See Instruction	is)	Employer (See In Self	nstructions)	
	Date	Full name of contributor Mitchell, Kirk	ut-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/10/2014	Contributor address; PO 8ox 4023 Austin, TX 78765-4023	City; State; Zip Code	•••••	\$350.00	
	4				(If travel outside of	f Texas, complete Schedule T)
	Principal occup Securities Inv	ation / Job title (See Instruction restment	is)	Employer (See In Self	nstructions)	

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 **POLITICAL CONTRIBUTIONS** SCHEDULE A OTHER THAN PLEDGES OR LOANS 1 PAGE# The Instruction Guide explains how to complete this form. Schedule: 7/10 Report: 10/29

				4011000101111	
2 FILER NAME	Casar, Gregorio			3 ACCOUNT # 00000010	(Ethics Commission filers)
4 Date	5 Full name of contributor Murphy, Edward	out-of-state PAC (ID#	}	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
12/07/2014	6 Contributor address; 6550 Fannin St Ste 2323 Houston, TX 77030-2747	City; State; Zip Code		\$100.00 (If trave) outside of	Texas, complete Schedule T}
9 Principal occu	pation / Job title (See Instruction	ns)	10 Employer (See In	structions)	
Date	Full name of contributor Niland, Nona	out-of-state PAC (ID#)	Amount of contribution (S)	In-kind contribution description (if applicable)
12/10/2014	Contributor address; 210 Lavaca St Apt 3005 Austin, TX 78701-4598	City; State; Zip Code		\$150.00	Texas, complete Schedule T}
Principal occu	pation / Job title (See Instructio	ns)	Employer (See In	structions)	100
Date	Full name of contributor Oliver, Guy	☐ out-of-state PAC (ID#	<u>*</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
12/11/2014	Contributor address; 1200 Verdant Way Austin, TX 78746	City; State; Zip Code		\$300.00	 Texas, complete Schedule T)
Principal occu General Man	I pation / Job title (See Instructio pager	ns)	Employer (See In V&S Enterprise	structions)	Texas, complete scriedula 1)
Date	Full name of contributor Oliver, Jason	out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
12/11/2014	Contributor address; 3267 Bee Cave Road #107 # Austin, TX 78746	City: State; Zip Code		\$300.00	
Torrer com-	PER DE LE CONTRACTOR DE LA CONTRACTOR DE L			(If travel outside of	Texas, complete Schedule 7)
Principal occu Land Manag	pation / Job title (See Instructio er	ns)	Employer (See In V&S Enterprise		
Date	Full name of contributor Oliver, Kerianne	out-of-state PAC (ID#	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)
12/11/2014	Contributor address; 1200 Verdant Way Austin, TX 78746	City: State; Zip Code		\$300.00	
	to a first team together			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instruction	ns)	Employer (See In	structions)	e same eloc

POLITICAL CONTRIBUTIONS

	OTHER	THAN PLEDGES OR LOAD	13		144 1541 - 1
	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 8/1	0 Report: 11/29
2	FILER NAME	Casar, Gregorio		3 ACCOUNT# 00000010	(Ethics Commission filers)
4	Date	5 Full name of contributor)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	12/11/2014	6 Contributor address; City; State; Zip Code 3267 Bee Cave Road #107 #92 Austin, TX 78746		\$300.00	
	H			(If travel outside of	Texas, complete Schedule T)
9	Principal occup Owner	pation / Job title (See Instructions)	10 Employer (See In: V&S Enterprise:		
	Date	Full name of contributor ut-of-state PAC (ID# Oliver, Vicki)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/11/2014	Contributor address; City; State; Zip Code 3267 Bee Cave Road #107 #92		\$300.00	8 1 1
		Auslin, TX 78746		/If travel outside of	Texas, complete Schedule T}
	Principal occur	pation / Job title (See Instructions)	Employer (See In	1.	Texas, conspicte ochedule 17
	Owner	Parion / 200 tine (See manactions)	V&S Enterprise		
1 1	Date	Full name of contributor ut-of-state PAC (ID# Quinzi, Paul)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/07/2014	Contributor address; City; State, Zip Code 5708 Avenue G Austin, TX 78752		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Attorney	pation / Job title (See Instructions)	Employer (See In Self	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/14/2014	Contributor address; City; State; Zip Code PO Box 59164 Austin, TX 78763		\$350.00	
1		- 1		(If travel outside of	Texas, complete Schedule T)
	Principal occup Developer	pation / Job title (See Instructions)	Employer (See In Self	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	ln-kind contribution description (if applicable)
	12/11/2014	Contributor address; City; State; Zip Code 3609 Vineland Dr Austin, TX 78722-1238	2	\$100.00	1 1 1 2
				/16 terment	Towns complete Catadula Ti
\vdash	Principal occur	pation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule T)
	i inicipal occul	salion, soo line (see mandelidis)	Employer (See II	addona)	

POLITICAL CONTRIBUTIONS

The Instruction	N Guide explains how to com	plete this form.		1 PAGE# Schedule: 9/	10 Report: 12/29
FILER NAME	Casar, Gregorio			3 ACCOUNT# 00000010	(Ethics Commission filers)
Date	Stuart, Donald	☐ out-of-state PAC (ID#		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
12/07/2014		City; State; Zip Code		\$150.00	
				(If travel outside of	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instruction	\$)	10 Employer (See In	structions)	
Date	Full name of contributor Swartwood, Alison	☐ out-of-state PAC (ID#	>	Amount of contribution (\$)	In-kind contribution description (if applicable)
12/10/2014	Contributor address; 12604 Rush Creek Ln Austin, TX 78732-1992	City; State; Zip Code		\$350.00	
17	¥2			(If travel outside of	Texas, complete Schedule T)
Principal occup Homemaker	ation / Job title (See Instruction	s)	Employer (See In Homemaker	structions)	
Date	Full name of contributor Swartwood, Slater	ut-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable
12/10/2014	Contributor address; 12604 Rush Creek Ln Austin, TX 78732-1992	City; State, Zip Code		\$350.00	1 1 1
-V				(If travel outside of	Texas, complete Schedule T)
Principal occup Marketing	ation / Job title (See Instruction	s)	Employer (See In Force Multiplier	structions)	
Date	Full name of contributor Tanner, Christy	out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable
12/12/2014	Contributor address; 8834 Honeysuckle Trail Austin, TX 78759	City; State; Zip Code		\$350.00	1 1 = ,- 1
				(If travel outside of	Texas, complete Schedule T)
Principal occup Business Ow	ation / Job title (See Instruction ner	3)	Employer (See In Yellow Cab	estructions)	
Date	Full name of contributor Texas State Building Trad)	Amount of contribution (\$)	In-kind contribution description (if applicable
12/12/2014	1106 Lavaca	City; State; Zip Code	-	\$350.00	
	Suite 201				

			1 PAGE#	
Ine Instruction	N GUIDE explains how to complete this form.			10 Report: 13/29
FILER NAME	Casar, Gregorio		3 ACCOUNT # 00000010	(Ethics Commission filers)
Date	5 Full name of contributor)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
12/12/2014	6 Contributor address; City; State; Zip Code 919 Congress Avenue Suite 1500 Austin, TX 78701		\$350.00	[exas, complete Schedule T}
Principal occup	ation / Job title (See Instructions)	10 Employer (See In	,	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
12/08/2014	Contributor address; City; State; Zip Code 4500 Tortuga Cove Austin, TX 78731		\$350.00 	
			(If travel outside of 1	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable
12/08/2014	Contributor address; City; State; Zip Code 1601 E 5th St Apt 208 Auslin, TX 78702-4495		\$200.00	
	ricolli, ta roroz 4400		(If travel outside of 1	(exas, complete Schedute T)
Principal occup IP Attorney	pation / Job title (See Instructions)	Employer (See In Wilson Sonsini	structions) Goodrich Rosati	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable
12/07/2014	Contributor address; City; State; Zip Code 7302 Meador Ave Austin, TX 78752-2726	- 24	\$100.00 	
				Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
-				

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

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

P.O.Box 12070

EXPENDITURE CATEGORIES

ense 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 ho	w to complete this form.	
1 PAGE#		2 FILER NAME		3 ACCOUNT # (TEC filers)
Schedule: 1/16 F	Report: 14/29	Casar, Gregorio	Land Land	00000010
4 Date	5 Payee name			
12/18/2014	Anderson, E	lizabeth		
6 Amount (\$)	7 Payee addres	S City; State; Zip Code		
\$302.00	444 Bevans			
	Heath, TX 7	5032		
			10.2	
8 PURPOSE		a Categories listed at the top of this schedule)	(b) Description (If travel outsi Contract Labor	ide of Texas, complete Schedule T)
OF	Salaries/wa	ges/Contract Labor	331111311313	
EXPENDITURE			Check If Austin, TX, officeho	ides living evennes
9 Complete ONLY if	Candidate / O	fficeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH				
Date	Payee name			
12/18/2014	Arnal, Mario			
Amount (\$)	Payee addres	,, , ,		
\$150.00	201 East 21: Austin, TX 7		·	
	Austin, TA	0712		
	Category (Se	a Categories listed at the top of this schedule)	Description (If travel outs	ide of Texas, complete Schedule T)
PURPOSE		ges/Contract Labor	Contract Labor	·
OF EXPENDITURE		9		
LAI ENDITORE	l		Check if Austin, TX, officeho	older living expense
Complete ONLY if	Candidate / O	fficeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH				
Date	Payee name			
12/10/2014	Baker, Chris			
Amount (\$)	Payee addres	s City; State; Zip Code		
\$482.50		**		
Ψ+02.30	Austin, TX			
-11				
DUDDOGE	Category (Se	e Categories listed at the top of this schedule)		ide of Texas, complete Schedule T)
PURPOSE	Salaries/Wa	ges/Contract Labor	Contract Labor	
EXPENDITURE	1000			
Complete ONLY /	Condidate (C	fficeholder name	Check if Austin, TX, officeho	Office held:
Complete ONLY if direct expenditure	Carloidate	nicendidel flame	Office sought.	Office field.
to benefit C/OH	my little (1) year-	High are the later to the later		
Date	Payee name			
12/18/2014	Baker, Chris			
Amount (\$)	Payee addres			
\$98.75	10218 Bilbro			
	Austin, TX	78748		
	G-A-			
PURPOSE		e Categories listed at the top of this schedule)	Description (If travel outs Contract Labor	side of Texas, complete Schedule T)
OF	Jaiai les/ VVa	ges/Contract Labor		
EXPENDITURE			Check If Austin, TX, officeho	older living avanges
Complete ONLY if	Candidate / O	fficeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH		5		

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense **Event Expense**

direct expenditure to benefit C/OH

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

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel Out Of District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Polling Expense Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 3 ACCOUNT # (TEC filers) 1 PAGE# 2 FILER NAME Casar, Gregorio Schedule: 2/16 Report: 15/29 00000010 4 Date 5 Payee name Balderas, Jessenia 12/18/2014 6 Amount (\$) Payee address City; State; Zip Code 4600 Elmont Dr. #1014 \$161.92 Austin, TX 78741 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) R PURPOSE Contract Labor Salaries/Wages/Contract Labor OF EXPENDITURE Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Payee name 12/18/2014 Bass, DJ Amount (\$) Payee address City; State; Zip Code 7910 Gault St. #207 Austin, TX 78757 \$431.25 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Contract Labor Salaries/Wages/Contract Labor OF EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Payee name Belman, Juan 12/18/2014 Amount (\$) Payee address City; State; Zip Code 139 West St. Elmo Dr. #1014 \$124.33 Austin, TX 78741 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Contract Labor Salaries/Wages/Contract Labor OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Payee name 12/18/2014 Belman, Micraim Amount (\$) Payee address City; State; Zip Code 139 West St. Elmo Dr. Apt. D203 Austin, TX 78745 \$109.33 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description **PURPOSE** Contract Labor Salaries/Wages/Contract Labor OF EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if Office sought: Office held:

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

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

EXPENDITURE CATEGORIES

anse Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (edgrs a category and listed above)

Fees	Printing Expense The Instruction G	Office Overhead/Re	ntal Expense	OTHER (ente	er a category not listed	
1 PAGE#	2 FILER NAME				3 ACCOUNT#	(TEC filers)
Schedule: 3/16 F					00000010	
4 Date	5 Payee name		······································			
12/16/2014	Bray, Timothy					
6 Amount (\$)	7 Payee address City; State;	Zip Code				
\$400.00		•				
8 PURPOSE OF	(a) Category (See Categories listed at the top of Salaries/Wages/Contract Labor	this schedule)	(b) Description Contract La	(If travel outsid	e of Texas, complete 5	Schedule T)
EXPENDITURE	The second secon		Check if Austle	ı, TX, officeholi	der living expense	- 6
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sou		Office held	
Date 12/18/2014	Payee name Bray, Timothy					
Amount (\$)	Payee address City: State;	Zip Code				
\$243.25	2200 South Pleasant Valley Rd. #10 Austin, TX 78741	•				
PURPOSE OF	Category (See Categories listed at the top of Salaries/Wages/Contract Labor	this schedule)	Description Contract La		le of Texas, complete \$	Schedule T)
EXPENDITURE			lп.,			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office so		der living expense Office held	
Date	Payee name					
12/29/2014	Bray, Timothy					
Amount (\$)	Payee address City; State;	Zip Code	1			
\$550.00	2200 South Pleasant Valley Rd. #10 Austin, TX 78741	7				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of Salaries/Wages/Contract Labor	(Inis schedule)	Description Contract La	bor	e of Texas, complete \$	Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office so		der tiving expense Office held	
Date	Payee name					IIIII
12/18/2014	Calderon, Alejandro					
Amount (\$)	Payee address City; State;	Zip Code			Design in	
\$436.00	PO Box 170519 Dallas, TX 75217	6				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of Salaries/Wages/Contract Labor	this schedule)	Description Contract La	bor	le of Texas, complete S	Schedule T)
Complete ONLY if	Candidate / Officeholder name		Check if Austi Office son		der living expense Office held	
direct expenditure to benefit C/OH	Candidate / Onlockolder Hame		Office Sof	agrit.	Office rield	

SCHEDULE F

Advertising Expense Accounting/Banking **Event Expense**

to benefit C/OH.

Gifts/Awards/Memonal Expense Legal Services Food/Beverage Expense Polling Expense

P.O.Box 12070

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Consulting Expense OTHER (enter a category not listed above) Fees **Printing Expense** Office Overhead/Rental Expense The INSTRUCTION GUIDE explains how to complete this form. 2 FILER NAME 1 PAGE# 3 ACCOUNT # (TEC filers) Casar, Gregorio 00000010 Schedule: 4/16 Report: 17/29 4 Date 5 Payee name 12/18/2014 Cantrell-Paulson, Wesley 6 Amount (\$) Pavee address City; State; Zip Code 9301 Spetrum Dr Apt 2335 \$505.00 Austin, TX 78717 8 (a) Calegory (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Contract Labor Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Рауее пате Carmack, Tim 12/18/2014 Amount (\$) Pavee address City; State; Zip Code 7910 Gault St. #106 \$818.00 Austin, TX 78757 Description Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) **PURPOSE** Contract Labor Salaries/Wages/Contract Labor OF EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 12/11/2014 Chapman Ross, Casey Amount (\$) Payee address City: State: Zip Code 1202 Folts Ave \$108.25 Austin, TX 78704 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Photography **Event Expense** OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held direct expenditure to benefit C/OH Date Payee name 12/18/2014 Dominguez, Javier Amount (\$) Payee address City; State; Zip Code 600 Barwood Park Apt 1623 \$561.00 Austin, TX 78753 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Contract Labor Salaries/Wages/Contract Labor OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Office sought: Candidate / Officeholder name Office held:

SCHEDULE F

Advertising Exper	186
Accounting/Banki	
Consulting Expen	
Event Expense	-
Econ	

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

P.O.Box 12070

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Jonations Made By
Candidate/Officeholder/Political Committee

Fees	Printing Expense Office Overhead/ The Instruction Guide explains how	Rental Expense OTHER (enter a category not listed above)
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 5/16 F	Report: 18/29 Casar, Gregorio	00000010
4 Date	5 Payee name	
12/18/2014	Douglas, Courtney	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$105.50	8700 Brodie, #1831 Austin, TX 78745	
8 PURPOSE OF	(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
EXPENDITURE	A COMPANY OF THE COMP	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	Payee name	
12/18/2014	Dove, Andy	The second section of the section of th
Amount (\$)	Payee address City; State; Zip Code	
\$748.58	504 Honeycomb Ridge Austin, TX 78746	
PURPOSE OF	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
EXPENDITURE		Territor 1.
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefil C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
12/18/2014	Dunaway, Josiah	
Amount (\$)	Payee address City; State; Zip Code	
\$1,222.33	1003 Justin Ln #2071 Austin, TX 78757	
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
Complete ONLY if	Candidate / Officeholder name	Check If Austin, TX, officeholder living expense Office sought: Office held.
direct expenditure to benefit C/OH	Candidate / Chacardidat Haine	Office Sought.
Date	Payee name	1.0
12/18/2014	Farasat, Romteen	
Amount (\$)	Payee address City; State; Zip Code	
\$662.25	1401 Meadgreen Cir Austin, TX 78758	
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:

SCHEDULE F

	EVACUATION A	ATECODICS					
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ng Legal Services Solicitationse Food/Beverage Expense Travel In Polling Expense Travel Output Printing Expense Office Over	Vages/Contract Labor Loan Repayment/Reimbursement n/Fundraising Expense Transportation Equipment & Related Expense					
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)					
Schedule: 6/16 F	eport: 19/29 Casar, Gregorio	00000010					
4 Date 12/29/2014	5 Payee name Farasat, Romteen						
6 Amount (\$)	7 Payee address City; State; Zip Code						
\$200.00	1401 Meadgreen Cir Austin, TX 78758	(A) 11 A)					
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedul Salaries/Wages/Contract Labor	e) (b) Description (If travel outside of Texas, complete Schedule T) Contract Labor					
EXPENDITURE		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	Payee name						
12/18/2014	Frankel, Hannah						
Amount (\$)	Payee address City; State; Zip Code	and the conject					
\$558.25	7910 Gault St. #111 Austin, TX 78757						
PURPOSE OF	Category (See Categories listed at the top of this schedul Salaries/Wages/Contract Labor	e) Description (If travel outside of Texas, complete Schedule T) Contract Labor					
EXPENDITURE	•						
Complete ONLY I	Candidate / Officeholder name	Office sought: Office held:					
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Onicerolder name	Office sought: Office held:					
Date	Payee name						
12/18/2014	Guerin, Cody						
Amount (\$)	Payee address City; State; Zip Code						
\$180.15	8405 Old Bee Caves Rd. Apt 223 Austin, TX 78735						
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedul Salaries/Wages/Contract Labor	Contract Labor					
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:					
Date	Payee name						
12/18/2014	Hardy, Marina						
Amount (\$)	Payee address City; State; Zip Code						
\$714.50	2643 Lyndale Ave Minneapolis, MN 55408						
PURPOSE OF	Category (See Categories listed at the top of this schedu Salaries/Wages/Contract Labor	e) Description (If travel outside of Texas, complete Schedule T) Contract Labor					
EXPENDITURE		Chast if Austic TV official adds to the second					
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:					

SCHEDULE F

Advertising Expense Accounling/Banking Consulting Expense Event Expense

to benefit C/DH

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

P.O.Box 12070

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

OTHER (enter a category not listed above) Printing Expense Office Overhead/Rental Expense The INSTRUCTION GUIDE explains how to complete this form. 1 PAGE # 2 FILER NAME 3 ACCOUNT # (TEC filers) Casar, Gregorio 00000010 Schedule: 7/16 Report: 20/29 4 Date 5 Payee name 12/18/2014 Haule, Margaret 6 Amount (\$) City; State; Zip Code Payee address PO Box 163014 Austin, TX 78716 \$509.25 8 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) PURPOSE Contract Labor Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Hollis, Geoff 12/18/2014 Amount (\$) Pavee address City; State; Zip Code 2702 Catalina Dr Austin, TX 78741 \$454.42 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE -Contract Labor Salaries/Wages/Contract Labor OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Horton, Margaret 12/18/2014 Amount (\$) Payee address City; State; Zip Code 5207 Welcome Glen \$536.00 Austin, TX 78759 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Contract Labor Salaries/Wages/Contract Labor OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Рауее пате 12/18/2014 Ingle, Jack Amount (\$) Payee address City; State; Zip Code 7910 Gault St Apt 211 \$807.25 Austin, TX 78757 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Contract Labor Salaries/Wages/Contract Labor OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure

SCHEDULE F

	3	8		100				
Accounting/Banking L. Consulting Expense F Event Expense P		EXPENDITURE CATEGO Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense The Instruction EXPENDITURE CATEGO Salarles/Wages/Con Salarles/Wages/Con Travel In District Travel In District Travel Out Of District Office Overhead/Rer The Instruction Guide explains how to			ntract Labor sing Expense Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee ntal Expense OTHER (enter a category not listed above)			
1 PAGE#		2 FILER NAME		76.343	- 1	3 ACCOUNT	# (TEC filers)	
Schedule: 8/16 F	Report: 21/29	Casar, Gregorio				0000001		
4 Date	5 Payee name	***************************************					Cor =	
12/18/2014	Kalz, Chais							
6 Amount (\$)	7 Payee address City, State; Zip Code							
\$760.25	1300 Crossing Pl. Austin, TX 78741							
8 PURPOSE OF EXPENDITURE		ee Categories listed at the top ages/Contract Labor	of this schedule)	(b) Description Contract I		side of Texas, complet	e Schedule T)	
	0	2/5 - 1 - 1/1	holder living expense					
9 Camplele ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:						ld:	
Date	Payee name		-	. 33				
12/15/2014	Kane, Tania	3		7374	EXII			
Amount (\$)	Payee addre	ss City; State;	Zip Code		441			
\$350.00	1206 East 3 Austin, TX							
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Description (If travel outside of Texas, complete S Contract Labor				e Schedule T)			
Camples ONLY I	Condidate /	Office holder name				nolder living expense	1-1-	
Complete ONLY if direct expenditure to benefit C/OH	Canolidate / C	Officeholder name		Office	sought:	Office he		
Date	Payee name	0						
12/18/2014	Kane, Tania							
Amount (\$)	Payee addre	ss City; State;	; Zip Code					
\$263.57	1206 East 3 Austin, TX							
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor			Contract I	Description (If travel outside of Texas, complete Schedule T) Contract Labor			
Complete ONLY if direct expenditure to benefit C/OH					Office he	eld:		
Date	Payee name						-	
12/29/2014	Kane, Tania							
Amount (\$)	Payee addre	ss City; State;	Zip Code					
\$550.00	1206 East 3 Austin, TX	30th Street	•					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Description (If travel outside of Texas, complete Contract Labor				e Schedule T)			
	The second					nalder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / (Officeholder name		Office	sought:	Office he	old:	

SCHEDULE F

Advertising Exper Accounting/Banki Consulting Exper Event Expense Fees	ing Legal Services Solicitation/Fundra	tract Labor Loan Repayment/Reimbursement ing Expense Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee otal Expense OTHER (enter a category not listed above)				
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)				
•	[00000010				
Schedule: 9/16 R	CPOIL 22/20	00000010				
4 Date 12/18/2014	5 Payee name Kaskoto, Anthony	1000				
6 Amount (\$)	7 Payee address City; State; Zip Code					
\$115.00	2225 Margalene Way Austin, TX 78728					
8 PURPOSE OF	(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				
EXPENDITURE		Check if Austin, TX, officeholder living expense				
9 Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:				
direct expenditure to benefit C/OH		e e e e e e e e e e e e e e e e e e e				
Date	Payee name					
12/08/2014	Kelly Graphics					
Amount (\$)	Payee address City; State; Zip Code					
\$5,616.79	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
\$5,010.79	Austin, TX 78746					
	Calegory (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)				
PURPOSE OF	Printing Expense	Printing				
EXPENDITURE						
	the second of the second second	Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:				
Date	Payee name					
12/10/2014	Kelly Graphics					
Amount (\$)	Payee address City; State; Zip Code					
\$3,161.16						
PURPOSE OF	Calegory (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) Printing				
EXPENDITURE		Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:				
Date	Payee name	1				
12/18/2014	Lakich, Ryan					
Amount (\$)	Payee address City; State; Zip Code	va e ga e gilicati.				
\$825.42						
Ψ020.42	Austin, TX 78752					
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)				
PURPOSE	Salaries/Wages/Contract Labor	Contract Labor				
OF EXPENDITURE						
EXI EMPITORE		Check if Austin, TX, officeholder living expense				
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:				
direct expenditure	Cartage of the reset fully	Onico noid.				

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

direct expenditure to benefit C/OH

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

P.O.Box 12070

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundralsing Expense Travel In District Travel Out Of District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

Polling Expense Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 3 ACCOUNT # (TEC filers) 1 PAGE# 2 FILER NAME Casar, Gregorio 00000010 Schedule: 10/16 Report: 23/29 4 Date 5 Payee name 12/15/2014 Lawler, John 6 Amount (\$) Payee address City, State; Zip Code 1902 Robbins Place \$1,500.00 Austin, TX 78705 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Salary Salaries/Wages/Contract Labor OF EXPENDITURE Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Pavee name Date 12/18/2014 Mckeever, Rebecca Amount (\$) Payee address City; State; Zip Code 1305 Summer Oak Dr Apt H Austin, TX 78704 \$553.98 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Contract Labor Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Рауее пате Milan, Alyssa 12/18/2014 Amount (\$) Payee address City; State; Zip Code 1740 Timber Ridge Road Apt. 127 \$167.75 Austin, TX 78741 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schodule T) **PURPOSE** Contract Labor Salaries/Wages/Contract Labor OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Pavee name 12/18/2014 Miller, Austin Amount (\$) Payee address City; State; Zip Code 13701 Fitzhugh Rd A Austin, TX 78736 \$448.65 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Contract Labor Salaries/Wages/Contract Labor OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY Candidate / Officeholder name Office sought: Office held:

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense **Event Expense**

to benefit C/OH

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

P.O.Box 12070

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

Polling Expense Printing Expense Travel Out Of District Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 2 FILER NAME 1 PAGE# 3 ACCOUNT # (TEC filers) Casar, Gregorio Schedule: 11/16 Report: 24/29 00000010 4 Date 5 Payee name 12/18/2014 Motta, Timoteo 6 Amount (\$) Payee address City; State; Zip Code 6721 Lancret Hill Dr \$232.62 Austin, TX 78745 (a) Category (See Categories listed at the top of this schedule) 8 (b) Description (If travel outside of Texas, complete Schedule T) PURPOSE Contract Labor Salaries/Wages/Contract Labor OF **EXPENDITURE** Check If Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Pavee name 12/16/2014 Murillo, Blanca Amount (S) Payee address City; State; Zip Code 1515 Wickersham Lane \$250.00 Austin, TX 78741 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE Contract Labor Salaries/Wages/Contract Labor OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Pavee name 12/15/2014 Nill, Ryan Amount (\$) Payee address City; State; Zip Code 7910 Gault St. #111 \$350.00 Austin, TX 78757 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) **PURPOSE** Contract Labor Salaries/Wages/Contract Labor **OF** EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Nill, Ryan 12/18/2014 Payee address Amount (\$) City; State; Zip Code 7910 Gault St. #111 \$192.00 Austin, TX 78757 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Contract Labor Salaries/Wages/Contract Labor OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure

direct expenditure to benefit C/OH

P.O.Box 12070 POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel in District Gifts/Awards/Memorial Expense Loan Repayment/Reimbursement Advertising Expense Accounting/Banking Consulting Expense Legal Services Food/Beverage Expense

Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Polling Expense Printing Expense Event Expense Fees Travel Out Of District
Office Overhead/Rental Expense OTHER (enter a category not listed above) The INSTRUCTION GUIDE explains how to complete this form. 2 FILER NAME 1 PAGE# 3 ACCOUNT # (TEC filers) Casar, Gregorio 00000010 Schedule: 12/16 Report: 25/29 4 Date 5 Payee name 12/29/2014 Nill, Ryan 6 Amount (\$) Payee address City; State; Zip Code 7910 Gault St. #111 Austin, TX 78757 \$700.00 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) PURPOSE Contract Labor Salaries/Wages/Contract Labor OF **EXPENDITURE** Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office held: Office sought: direct expenditure to benefit C/OH Date Pavee name 12/07/2014 Office Depot Amount (\$) Payee address City; State; Zip Code 2620 W Anderson Ln Austin, TX 78757 \$18.93 Calegory (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE Office supplies Office Overhead/Rental Expense EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Payee name 12/09/2014 Office Depot City; State; Zip Code Amount (\$) Payee address 2620 W Anderson Ln \$164.92 Austin, TX 78757 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) office supplies **PURPOSE** Office Overhead/Rental Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Date Pavee name 12/09/2014 Office Depot Amount (\$) Payee address City; State; Zip Code 2620 W Anderson Ln \$68.76 Austin, TX 78757 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description Office supplies **PURPOSE** Office Overhead/Rental Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held:

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

direct expenditure to benefit C/OH

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

EXPENDITURE CATEGORIES

Salaries/Wages/Contract Labor
Sollcitation/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)

Polling Expense Printing Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 PAGE# 3 ACCOUNT # (TEC filers) FILER NAME Casar, Gregorio 00000010 Schedule: 13/16 Report: 26/29 4 Date 5 Payee name Office Depot 12/12/2014 Amount (\$) Payee address City; State; Zip Code 2620 W Anderson Ln \$105.26 Austin, TX 78757 (b) Description (If travel outside of Texas, complete Schedule T) (a) Category (See Categories listed at the top of this schedule) PURPOSE Office supplies Office Overhead/Rental Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Pavee name 12/08/2014 Postmaster Amount (S) Payee address City; State; Zip Code 7700 Northcross Dr. \$392.00 Austin, TX 78757 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** Postage Printing Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Office held: Complete ONLY if Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH Pavee name Date 12/09/2014 **Postmaster** Amount (S) Payee address City; State; Zip Code 7700 Northcross Dr. \$170.00 Austin, TX 78757 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Postage **Printing Expense** OF EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought: Office held: Complete ONLY if direct expenditure to benefit C/OH Date Pavee name 12/18/2014 Prichard, Casey Amount (\$) Payee address City; State; Zip Code 7303 Woodhollow Dr \$649.50 Austin, TX 78731 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) Contract Labor **PURPOSE** Salaries/Wages/Contract Labor OF EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought: Office held: Complete ONLY if

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

EXPENDITURE CATEGORIES Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense

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

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

Polling Expense Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 2 FILER NAME 3 ACCOUNT # (TEC filers) 1 PAGE# Casar, Gregorio Schedule: 14/16 Report: 27/29 00000010 Date 5 Payee name 12/18/2014 Puentes, Greg 7 Payee address City; State; Zip Code 6 Amount (\$) 6713 Shoal Creek Blvd \$142.52 Austin, TX 78757 8 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Contract Labor Salaries/Wages/Contract Labor EXPENDITURE Check If Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Рауее пате Quinones, Jordan 12/18/2014 Amount (\$) Payee address City; State; Zip Code 1825 Spillman St Austin, TX 78704 \$163.70 Description (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) **PURPOSE** Contract Labor Salaries/Wages/Contract Labor EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought: Office held: Complete ONLY if direct expenditure to benefit C/OH Date Payee name 12/18/2014 Ryder Turner, Aubrey Amount (\$) Pavee address City; State; Zip Code 3305 Dolphin Dr \$109.57 Austin, TX 78704 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) Contract Labor **PURPOSE** Salaries/Wages/Contract Labor OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 12/18/2014 Seidel, Meg Amount (\$) Payee address City; State; Zip Code 7910 Gault #207 \$493.67 Austin, TX 78757 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Contract Labor Salaries/Wages/Contract Labor OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH

to benefit C/OH

P.O.Box 12070 POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Salaries/Wages/Contract Labor Solicitation/Fundralaing Expense Advertising Expense Accounting/Banking Consulting Expense Event Expense Loan Repayment/Reimbursement Gifts/Awards/Memorial Expense Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Legal Services Food/Beverage Expense Polling Expense Travel In District Travel Out Of District OTHER (enter a category not listed above) Office Overhead/Rental Expense Fees Printing Expense The INSTRUCTION GUIDE explains how to complete this form. 1 PAGE # 2 FILER NAME 3 ACCOUNT # (TEC filers) Casar, Gregorio 00000010 Schedule: 15/16 Report: 28/29 4 Date Payee name 12/29/2014 Seidel, Meg 6 Amount (\$) Payee address Zip Code City: State: 7910 Gault #207 \$200.00 Austin, TX 78757 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Photography Consulting Expense EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Starratt, Brandon 12/18/2014 Payee address State: Zip Code Amount (\$) City; 1930 W Rundberg Apt 1118 Austin, TX 78758 \$201.25 (If travel outside of Texas, complete Schedule T) Category (See Categories fisted at the top of this schedule) Description **PURPOSE** Canvassers Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Office sought: Office held: Complete ONLY if Candidate / Officeholder name direct expenditure to benefit C/OH Date Payee name Tovar, Michael 12/18/2014 Payee address City; State; Zip Code Amount (\$) 244 Stennis \$299.32 Kyle, TX 78640 (if travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description Contract Labor **PURPOSE** Salaries/Wages/Contract Labor OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 12/18/2014 Villalobos, Omar Amount (\$) Payee address City; State; Zip Code 8004 Briarton Dr \$315.15 Austin, TX 78747 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Contract Labor Salaries/Wages/Contract Labor OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office held: Office sought: direct expenditure

POLITIC	AL EXPENDITURES	SCHEDULE F
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ing Legal Services Solicitation/Fundr	Contract Labor raising Expense transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee (Rental Expense COTHER (enter a category not listed above)
1 PAGE# Schedule: 16/16	2 FILER NAME	3 ACCOUNT # (TEC filers 00000010
4 Date	5 Payee name	
12/29/2014	Worley Printing	1800-15 J
6 Amount (\$) \$1,668.14	7 Payee address City; State; Zip Code 3217 North IH 35 Austin, TX 78722	
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
		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	Payee name	
12/18/2014	Wuersig, Paul	
Amount (\$) \$653.50	Payee address Cily; State; Zip Code 9522 Woodvale Dr Apt B Austin, TX 78729	
PURPOSE OF	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
EXPENDITURE		Check If Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
12/15/2014	Yancy, Max	
Amaunt (\$) \$400.00	Payee address City; State; Zip Code 2409 East 9th St.11 Austin, TX 78702	
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
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 12/29/2014	Payee name Yancy, Max	
Amount (\$)	Payee address City; State; Zip Code	
\$1,000.00	2409 East 9th St.11 Austin, TX 78702	10,000
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
EXPERION	e 2 e	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 c	ommittee: <u>G</u>	eg Casar	
For each checking, savings or other financial following information indicated. For each add			
The name of the financial institution: Frost			
Type of account: Checking			
The beginning balance: \$0			
		# 26	
The ending balance: 25,502.36			

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

Date		Payee	Amount
	12/1/2014	Andy Dove	264
	12/1/2014	Jack Ingle	150
	12/18/2014	Alejandro Calderon	436
	12/18/2014	Andy Dove	748.58
	12/18/2014	Chais Kalz	760.25
	12/18/2014	Jessenia Balderas	161.92
	12/18/2014	Margaret Haule	509.25
	12/18/2014	Geoff Hollis	454.42
	11/7/2014	Elizabeth Dorantes	87.5
	11/7/2014	Ethan Smith	293.5
	11/7/2014	Priscilla Wendinger	52.5
	12/1/2014	Brandon Starratt	92.4
	12/18/2014	Angela Walton	42.5
	12/18/2014	Alyssa Milan	167.75
	12/18/2014	Anthony Kaskoto	115
	12/18/2014	Casey Prichard	649.5

SCHEDULE ATX. 4 - attach to form C/OH (C&E)

Reference § 2-2-25, Austin City Code

,	12/18/2014	Courtney Douglas	105.5
Tan	12/18/2014	Elizabeth Anderson	302
ii ii	12/18/2014	Mario Arnal	150
	12/18/2014	Nanette Pierce	88.75
	12/18/2014	Paige Henderson	17.5
	12/18/2014	Rebecca Mckeever	553.98
	12/18/2014	Tania Kane	263.57
	12/18/2014	Will Davies	60
	12/29/2014	Max Yancy	1,000.00
	12/29/2014	Ryan Nill	700
÷.	12/29/2014	Timothy Bray	550
	12/29/2014	Tania Kane	550
R.	12/29/2014	Romteen Farasat	200
2 2 2 1 1 1 1	12/29/2014	Tiffany Burd	130
	12/29/2014	Meg Seidel	200

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

Date of receipt	Contributor	Amount
9		

Amount of interest	or dividends earned:	\$1.35
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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	\$1.35 bank interest	
5-6-14	.05 cents Gvalidate text deposit for bank services	
		V III A A E

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
0.002	3 p = 10	

BUNDLING REPORT

Name of candidate/officeholder: Greg Casar

1. For each person/bundler who has solicited and obtained campaign contributions on your behalf of \$200 or more per person from five (5) or more individuals during the reporting period, provide the following information. (This requirement does not apply to an individual who raises funds in total amount of \$5,000 or less for a candidate through a fundraising event held at the individual's residence.)

Name of	Address	Occupation	Employer	Total Amount
Individual/Bundler	Thoronges 100	and the second second	The state of the s	Bundled
Edward Kargbo	8834 Honeysuckle Trail Austin, TX 78759	President	Greater Austin Transportation Company	\$2,450
Jerry Harris	111 Congress Ave, Suite 1400 Austin, TX 78701	Partner	Husch Blackwell LLP	\$1,750
Nikelle Meade	5363 Austral Loop Austin, TX 78739	Partner	Husch Blackwell LLP	\$1,550
	3			
	1 22	- m-s1		
		159		

2. For each person identified above, enter the name and address of each individual contributor whose contribution was bundled by that individual. Attach additional sheets if necessary.

Name of	Address	Occupation	Employer	Contribution	Bundler
Contributor		Si	=	Amount	
Suzanne Harter	8 Winston Woods Drive Houston, TX 77024	Homemaker	None	\$350	Edward Kargbo
Steven Harter	8 Winston Woods Drive Houston, TX 77024	Chairman	Texas Taxi Inc	\$350	Edward Kargbo
Roman Martinez	510 E 7th St Houston, TX 77007	President/CEO	Texas Taxi Inc	\$350	Edward Kargbo
Dlana Martinez	510 E 7th St Houston, TX 77007	Homemaker	None	\$350	Edward Kargbo
Edward Kargbo	8834 Honeysuckle Trail Austin, TX 78759	President	Greater Austin Transportation Company	\$350	Edward Kargbo
Christy Tanner	8834 Honeysuckle Trail Austin, TX 78759	Business Owner	Yellow Cab	\$350	Edward Kargbo
Texas Taxi Political Action Committee	919 Congress Avenue Suite 1500 Austin, TX 78701	8		\$350	Edward Kargbo
Husch Blackwell State PAC	111 Congress Avenue Suite 1400 Austin, TX 78701			\$350	Jerry Harris
Husch Blackwell LLP	4801 Main Street Suite 1000 Kansas City, MO 64112			\$350	Jerry Harris

F. Paul Celauro	5326 McCulloch Circle Houston, TX 77056	Engineer	Dannenbaum Engineering	\$350	Jerry Harris
Thomas Arndt	19907 Kennemer Drive Pflugerville, TX 78660	President	Dannenbaum Engineering Company - Austin, LLC	\$350	Jerry Harris
James Dannenbaum	3100 W. Alabama Street Houston, TX 77098	Central Texas Division Manager	Dannenbaum Construction Co.	\$350	Jerry Harris
Kerianne Oliver	1200 Verdant Way Austin, TX 78746	Homemaker	None	\$300	Nikelle Meade
Guy Oliver	1200 Verdant Way Austin, TX 78746	General Manager	V&S Enterprises	\$300	Nikelle Meade
Jason Oliver	3267 Bee Cave Road #107 #92 Austin, TX 78746	Land Manager	V&S Enterprises	\$300	Nikelle Meade
Vicki Oliver	3267 Bee Cave Road #107 #92 Austin, TX 78746	Owner	V&S Enterprises	\$300	Nikelle Meade
Stacy Oliver	3267 Bee Cave Road #107 #92 Austin, TX 78746	Owner	V&S Enterprises	\$300	Nikelle Meade
Alexandra Jashinsky	5001 Bent Creek Court El Dorado Hills, CA 95762	Associate	Husch Blackwell LLP	\$25	Nikelle Meade
Nikelle Meade	5363 Austral Loop Austin, TX 78739	Partner	Husch Blackwell LLP	\$25	Nikelle Meade

Office of the City Clerk, 20.36

Revised by the Ethics Review Commission 03/26/2014

Page 1 of 2

SCHEDULE ATX.	5 - attach to	form C	C/OH (C &	E)
Reference § 2-2-22,	Austin City	Code			

		(\$)
	 	-
		7.77

9		

Note: It is important to remember that contributions to you are from the <u>actual donor</u>, <u>not</u> from the individual who solicited the donations on your behalf. Therefore, on form C/OH you must identify the actual donor as the contributor.

STATE OF TEXAS VERIFICATION

I certify that the total amount bundled on my behalf in the campaign period by all partners, shareholders, principals, employees, and persons who conduct business through a business association that is subject to City Code, Section 2-2-22(E), when added together, does not exceed ten (10) times the contribution limit set by City Charter, Article III, Section 8(A)(1) for the entire business association.

Signature

2015

Texas Ethics Commission

P.O. Box 12070

Austin, Texas 78711-2070

(512) 463-5800

(TDD 1-800-735-2989)

	TE / OFFICEHOLDER FORM COVER SHEE	
The C/OH Instruction	Guide explains how to complete this form. 1 ACCOUNT # (Ethics Commission Filers) 2 Total pages filed:	e snc
3 CANDIDATE / OFFICEHOLDER NAME	Sheryl NICKNAME LAST Cole MI OFFICE USE Date Received	ONLY 2015 JAN
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS change of address	PO Box 13; Austin TX; 78767	arked on
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER	13
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FI RC NICKNAME LAS AU	ő
7 CAMPAIGN TREASURER ADDRESS (residence or business)	3707 Laurel Ledge	
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMB (512) 784-897	l l
9 REPORT TYPE	January 15 30th day before election Runoff 15th day after camps feasurer appointmen followholder only) July 15 8th day before election Exceeded \$500 Final report (Attach C/C)	~ ~
10 PERIOD COVERED	Month Day Year Month Day Year 10 26 14 THROUGH 12 31 14	
11 ELECTION	ELECTION DATE Month Day Year 11 / 4 / 14 ELECTION TYPE Primary Runoff General	Special
12 OFFICE	OFFICE HELD (if arry) 13 OFFICE SOLIGHT (if known) Mayor	
	GO TO PAGE 2	

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989) **CANDIDATE / OFFICEHOLDER** FORM C/OH CAMPAIGN FINANCE REPORT COVER SHEET PG 1 1 ACCOUNT# 2 Total pages filed: The C/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) MS/MRS/MR 3 CANDIDATE / FIRST M OFFICE USE ONLY OFFICEHOLDER Sheryl NAME Date Received NICKNAME LAST SUFFIX Cole 4 CANDIDATE / ADDRESS /PO BOX; APT/SUITE#: CITY; STATE; ZIP CODE OFFICEHOLDER MAILING Date Hand-delivered or Postmarked PO Box 13; Austin TX; 78767 **ADDRESS** change of address Receipt # Amnual 5 CANDIDATE/ AREA CODE PHONE NUMBER EXTENSION **OFFICEHOLDER** Date Processed (512) 814-8795 PHONE 6 CAMPAIGN MS/MRS/MR FIRST Date Imaged TREASURER Robbie NAME LAST NICKNAME SUFFIX Ausley 7 CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE#; STATE: ZIPCODE TREASURER **ADDRESS** 3707 Laurel Ledge Ln; Austin TX; 78731 (residence or business) AREA CODE PHONE NUMBER 8 CAMPAIGN EXTENSION TREASURER (512) 784-8971 PHONE 9 REPORT TYPE January 15 15th day after campaign 30th day before election Runoff freasurer appointment fofficeholder only) July 15 8th day before election Exceeded \$500 Final report (Attach C/OH - FR) limit 10 PERIOD Month Month COVERED THROUGH 10 / 26 / 14 12 / 31 / **ELECTION TYPE** 11 ELECTION **ELECTION DATE** Runoff General . Special 12 OFFICE OFFICE HELD (if arry) 13 OFFICE SOUGHT (if known) Mayor

GOTO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME		15	ACCOUNT # (Ethics Commission Filers)
16 NOTICE FROM POLITICAL COMMITTEE(S)	CANDIDATE / OFFICE	ICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE OF THE CANDIDA SERVICE OF THE SERVICE	ATE'S OR OFFICEHOLDER'S KNOWLEDGE OR
	COMMITTEE TYPE GENERAL SPECIFIC	COMMITTEE NAME COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS	
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN SS, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 8,925
EXPENDITURE TOTALS	3. TOTAL F	OLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZ	ED \$ 157.69
٠	4. TOTAL	POLITICAL EXPENDITURE'S	\$ 89,244.92
CONTRIBUTION BALANCE	5. TOTAL P OF REPO	\$ 452.21	
OUTSTANDING LOAN TOTALS		RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE Y OF THE REPORTING PERIOD	\$ 1,600.00
Notary Pu My Cor Octo	scribed before i	I swear, or affirm, under penalty of peris true and correct and includes all informe under Title 15, Election Code. Signature of Candid Signature	formation required to be reported by late or Officeholder
Signature of officer admir	nistering oath	Hn Franklin Printed name of officer administering oath	Notaru Title of officer administering oath
*	-	-	

SCHEDULE A

The	Instruction Guide explains how to complete this	s form.	1 Total pages Sch	nedule A:
2 FILER NAME			3 ACCOUNT # (E	Ethics Commission Filers)
4 Date	5 Full name of contributorout-of-state PAC (ID#_		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
10/27/14	Louis Simms 6 Contributor address; City; State: Zip Code	· · · · · · · · · · · · · · · · · · ·	25.00	
	750f Barcelona Dr; Austin	TX; 78752		1
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See I	^	of Texas, complete Schedule T)
Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
10/28/14	Contributor address; City: State; Zip Code		350.00	
	6649 White Marsh; Austin T	X; 78746		}
	 pation / Job title (See Instructions) altor	Employer (See I	Instructions)	of Texas, complete Schedule T) Lf employed
				7
Date 10/28/1	Full name of contributor)	Amount of contribution (\$)	tn-kind contribution description (if applicable)
4	Contributor address; City; State; Zip Code		350.00	The state of the s
	PO Box 12661; Austin TX; 7	78711	(if travel outside	of Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions) Finance Director	Employer (See I	instructions)	KAZI
Date 10/28/14	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
	Contributor address; City: State; Zip Code 6725 Hot Springs Dr; Austi		100.00	<u> </u>
! !	0723 not Springs br, Austr	II IX, 70743	(If travel outside	of Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See I		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/28/14	Contributor address; City; State; Zip Code		50.00	
	i			l
	PO Box 160746; Austin TX; 787	16	45	of Texas, complete Schedule T)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A

The	Instruction Guide explains how to complete this for	m.	1 Total pages Sch	edule A:
FILER NAME			3 ACCOUNT # (E	thics Commission Filers)
Date 10/28/14	5 Full name of contributorout-of-state PAC(ID#: Howell Beaver 6 Contributor address; City; State; Zip Code 4902 Travis County Cir; Austi	in TX:	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable
	78735		(If travel outside	of Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions) 10	Employer (See II	nstructions)	
Date 10/28/1 4	Full name of contributor out-of-state PAC(ID#: Andrea Stover Contributor address; City; State: Zip Code 401 Congress Ave; Austin TX;	78701	Amount of contribution (\$)	In-kind contribution description (if applicable
Principal occu	pation / Job title (See Instructions)	Employer (See II		of Texas, complete Schedule T)
Date 10/30/14	Full name of contributor out-of-state PAC(ID#:	753	Amount of contribution (\$)	In-kind contribution description (if applicable
Principal occu	pation / Job title (See Instructions) Retired	Employer (See I	netriations)	of Texas, complete Schedule T) Retired
Date 10/30/14	Full name of contributor out-of-state PAC(ID#	rx; 78701	Amount of contribution (\$)	In-kind contribution description (if applicable of Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See I	~	
Date 10/30/1 4	Full name of contributorout-of-state PAC (ID#: Carol Fredericks Contributor address; City; State; Zip Code		Amount of contribution (\$)	In-kind contribution description (if applicable
	305 E. 32nd St; Austin TX; 7			of Texas. complete Schedule T)
Principal occur	pation / Job title (See Instructions) Retired	Employer (See I	nstructions)	Retired

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989) POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS 1 Total pages Schedule A: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 ACCOUNT # (Ethics Commission Filers) 4 Date 5 Full name of contributor 7 Amount of Qut-of-state PAC (ID#) In-kind contribution contribution (\$) description (if applicable) Jeffery Archer 10/30/14 100.00 6 Contributor address; City; State; Zip Code 1705 Elmhurst Dr; Austin TX; 78741 (If travel outside of Texas, complete Schedule T) 9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Date Full name of contributor Out-of-state PAC (ID# Amount of In-kind contribution contribution (\$) description (if applicable) Earl Hairston 10/30/14 Contributor address; City; State: Zip Code 350.00 4106 Medical Pkwy; Austin TX; 78756 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Full name of contributor ut-of-state PAC (ID#: Amount of In-kind contribution Date description (if applicable) contribution (\$) Abdul & Zarina Patel 10/30/14 Contributor address; City; State; Zip Code 150.00 915 W. Oltorf; Austin TX; 78704 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Sunrise mini-mart Owner Full name of contributor In-kind contribution Date ut-of-state PAC (ID#: Amount of contribution (\$) description (if applicable) William Kuykendall 10/30/14 200.00 Contributor address; City; State; Zip Code 106 E. 6th St; Austin TX; 78701 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Attorney Self employed Full name of contributor In-kind contribution Amount of Date ut-of-state PAC (ID#:_ description (if applicable) contribution (\$) Frank & Lynn Cooksey 10/30/14 Contributor address: City: State: Zip Code 100.00 2208 Matthews Dr; Austin TX; 78703 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Self employed Attorney

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The	Instruction Guide explains how to complete this for	orm.	1 Total pages Sch	edule A:
2 FILER NAME			3 ACCOUNT # (Ethics Commission Filers)	
4 Date 10/30/14	5 Full name of contributoroul-of-state PAC (ID#: Ron & Phuong Kampa)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	6 Contributor address; City; State; Zip Code 3902 Glengarry Dr; Austin T	'X; 78731	50.00	 pf Texas, complete Schedule T)
9 Principal occup	pation / Job title (See Instructions)	0 Employer (See I		
Date 10/30/1 4	Full name of contributor out-of-state PAC (ID# Linda Connor		Amount of contribution (\$)	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 1307 McKinley Ave; Austin Ti	K; 78702	50.00	
Principal occup	pation / Job title (See Instructions) Retired	Employer (See In		of Texas, complete Schedule T)
Date 10/30/14	Full name of contributor Out-of-state PAC (ID#:		Amount of contribution (\$)	In-kind contribution description (if applicable)
	Contributor address: City: State: Zip Code 4416 Ramsey Ave; Austin TX;	78756	350.00	
Principal occup	ation / Job title (See Instructions) Owner	Employer (See In		of Texas, complete Schedule T) e2 Zee
Date 10/30/14	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/30/14	Contributor address: City: State: Zip Code 6005 Shoalwood Ave; Austin	rx; 78757	100.00	
Principal occup	ation / Job title (See Instructions)	Employer (See In	·····	of Texas, complete Schedule T)
Date 10/30/14	Full name of contributor out-of-state PAC (ID#: Linda Connor		Amount of contribution (\$)	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 1307 McKinley Ave; Austin TX	K; 78702	150.00	of Texas, complete Schedule T)
		. 1		

SCHEDULE A

			• • • • • • • • • • • • • • • • • • • •
The	Instruction Guide explains how to complete this form.	1 Total pages Sch	nedule A:
2 FILER NAME		3 ACCOUNT # (E	thics Commission Filers)
4 Date	5 Full name of contributorout-of-state PAC(ID#:)	7 Amount of	8 In-kind contribution
10/30/14	Joyce McDonald	contribution (\$)	description (if applicable)
	6 Contributor address; City, State; Zip Code	150.00	,
	123 Saguaro Dr; Buda TX 78610		
O Crimainal	1		of Texas, complete Schedule T)
9 Minicipal occu	pation / Job title (See Instructions) 10 Employer (See	Instructions)	
Date	Full name of contributor	Amount of	In-kind contribution
10/00/54	Babette Ellis	contribution (\$)	description (if applicable)
10/30/14	Contributor address; City; State; Zip Code	350.00	<u> </u>
	7107 Brodie Ln; Austin TX; 78745		!
Description of the same	- Note / John Mile (Con (notwork) - 1)		of Texas, complete Schedule T)
- Fincipal occup	pation / Job title (See Instructions) Realtor Employer (See I		lf employed
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of	In-kind contribution
10/30/14	Vivan Ross-Bennett	contribution (\$)	description (if applicable)
10/30/14	Contributor address; City; State; Zip Code	350.00	<u> </u>
	7804 Taranto Dr; Austin TX 78729		<u> </u>
		(If travel outside	of Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions) Retired Employer (See I	nstructions)	Retired
Date	Full name of contributor	Amount of	In-kind contribution
10/30/14	Beth Guillot	contribution (\$)	description (if applicable)
10/30/14	Contributor address; City; State; Zip Code	100.00	
	2216 Thornton Rd.; Austin TX 78704		}
		············	of Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions) Employer (See I	nstructions)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of	In-kind contribution
	Kenneth Willis	contribution (\$)	description (if applicable)
10/30/14	Contributor address; City; State; Zip Code	350.00	
	3103 Honey Tree Ln; Austin TX 78746		
		(If travel outside of	l of Texas, complete Schedule T)
Principal occup	eation / Job title (See Instructions) Principal Employer (See I	nstructions) Wil	lis
			-
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE	AS NEEDED	

SCHEDULE A

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A:	
2 FILER NAME			3 ACCOUNT # (E	thics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
10/30/14	Jill & Phil Henderson			
	6 Contributor address; City, State; Zip Code		100.00	
	8818 Mountain Path Circle; 78759	Austin TX;		
9 Principal occur	pation / Job title (See Instructions)	40 Employee (Co.)	L	of Texas, complete Schedule T)
o i inicipal cocci	salor / sob line (see manuchurs)	10 Employer (See I	instructions)	
Date	Full name of contributor	}	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/30/14	Contributor address; City; State; Zip Code 6705 Hillcroft Dr; Austin T 78724	x;	25.00	
	78724		/If travel outside o	of Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See I		. voludo, comprete acritedate 17
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/30/1 4	Ara Merjanian Contributor address; City; State; Zip Code		50.00	
	3211 Hampton Rd.; Austin T	X; 78705		
			(If travel outside	of Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See I	nstructions)	
Date	Full name of contributor)	Amount of	In-kind contribution
10/21/1	Mr. & Mrs. Bill Krueger		contribution (\$)	description (if applicable)
10/31/1 4	Contributor address; City: State; Zip Code 2426 Fairway Dr.; Austin TX 75080		350.00	
			(If travel outside of	of Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions) Partner	Employer (See I	nstructions)	Kamie Krueger
Date	Full name of contributor out-of-state PAC (ID#:	}	Amount of	In-kind contribution
	David Featherston		contribution (\$)	description (if applicable)
10/31/14	Contributor address; City; State; Zip Code 16200 Double Eagle Dr; Aust 78717	in TX	50.00	
	-	·	(If travel outside o	of Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See I		

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SCHEDULE A

The	Instruction Guide explains how to complete this	form.	1 Total pages Sch	nedule A:
2 FILER NAME			3 ACCOUNT # (E	thics Commission Filers)
4 Date 10/31/1	5 Full name of contributorout-of-state PAC (ID# Emma .Linn)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
4	6 Contributor address; City; State: Zip Code 2400 Vista Ln; Austin TX;		200.00	
	78703		If travel outside	of Texas, complete Schedule T)
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See.	······	or rexes, complete Scriedule 1)
Date 10/31/1	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
4	Contributor address: City; State: Zip Code 2903 Tarry Trl; Austin TX 7	8703	150.00	
			/If travel outside	of Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See I	**************************************	rexas, complete schedule 1)
Date	Full name of contributor out-of-state PAC (ID#:		Amount of	In-kind contribution
10/31/1	Marjon Christopher		contribution (\$)	description (if applicable)
4	Contributor address; City; State; Zip Code			
	3307 Woodbriar Ln; Austin	TX;	100.00	
	78723			
Dringing Consu	notion (Joh title (Con Instructions)	5		of Texas, complete Schedule T)
enncipal occuj	pation / Job title (See Instructions)	Employer (See I	nstructions)	
Date	Full name of contributor out-of-state PAC (ID#:	1	Amount of	In-kind contribution
	Roberto Garcia	,	contribution (\$)	description (if applicable)
10/31/14	Contributor address; City; State; Zip Code		100.00	1
	PO Box 81356; Austin TX; 7	8708	200.00	
				of Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See I	nstructions)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of	In-kind contribution
	Bonny Gardner		contribution (\$)	description (if applicable)
11/1/14	Contributor address; City; State; Zip Code		100.00	
	3207 Kerbey Ln; Austin TX;	78703	200,00	
			(If travel outside	of Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See I	<u> </u>	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A

11/1/14 I 6 6 7 7 7 7 7 7 7 7	Full name of contributor out-of-state PAC(ID#:_Denise Davis Contributor address; City; State; Zip Code 808 W. 14th St.; Austin TX 8701 1 / Job title (See Instructions) N/A Full name of contributor out-of-state PAC(ID#:_ Cotty Holman Contributor address; City; State; Zip Code 751 County Rd 103; Llano 18643	10 Employer (See	7 Amount of contribution (\$) 350.00	8 In-kind contribution description (if applicable) of Texas, complete Schedule T) N/A In-kind contribution description (if applicable)
11/1/14 I 6 6 6 7 7 8 9 Principal occupation Date F 11/1/14 S 6 6 6 7 8 9 9 S 11/1/14 S 6 6 6 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	Denise Davis Contributor address; City; State; Zip Code 108 W. 14th St.; Austin TX 18701 In / Job title (See Instructions) N/A Full name of contributor	10 Employer (See	(If travel outside instructions) Amount of contribution (\$)	description (if applicable) of Texas, complete Schedule T) N/A In-kind contribution
9 Principal occupation Date F 11/1/14	608 W. 14th St.; Austin TX 8701 In / Job title (See Instructions) N/A Full name of contributor	10 Employer (See	(If travel outside instructions) Amount of contribution (\$)	N/A In-kind contribution
Date 5	Full name of contributor		Amount of contribution (\$)	N/A In-kind contribution
11/1/14 S	Scotty Holman Contributor address; City; State; Zip Code 751 County Rd 103; Llano	TX;	contribution (\$)	·
11/1/14	Contributor address; City; State; Zip Code 751 County Rd 103; Llano	TX;	350.00	' -
		TX;		
78			/If travel outside (I I Of Texas, complete Schedule T)
Principal occupation	n / Job title (See Instructions)	Employer (See I	nstructions)	t Choice
V	Full name of contributor 🔲 out-of-state PAC (ID#:_ William Head)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Po	Contributor address; City: State; Zip Code O Box 50065; Austin TX; 8763		75.00]
Principal occupation	n / Job title (See Instructions) e	Employer (See I		of Texas, complete Schedule T)
	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
16	Contributor address; City; State; Zip Code 500 Copperhead Cv; Round R	Rock;	100.00	
	K 78664	5		of Texas, complete Schedule T)
Principal occupation	n / Job title (See Instructions)	Employer (See I	nstructions)	· · · · · · · · · · · · · · · · · · ·
1	Full name of contributor 🔲 out-of-state PAC(ID#:_ Valerie Sampson		Amount of contribution (\$)	In-kind contribution description (if applicable)
10	Contributor address; City; State; Zip Code 045 Elliott Ranch Rd.; Bu	da TX;	350.00	
	8610			of Texas, complete Schedule T)
Principal occupation	/ Job title (See Instructions) Office Manager	Employer (See I	nstructions) Ma	ark Simpson

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SCHEDULE A

The	e Instruction Guide explains how to complete this	s form.	1 Total pages Sch	nedule A:
2 FILER NAME	.		3 ACCOUNT # (E	Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of	8 In-kind contribution
11/1/14	· - · · · · · · · · · · · · · · · ·		contribution (\$)	description (if applicable)
11/1/14				•
	6 Contributor address; City; State; Zip Code		350.00	
	5817 Wilcab; Austin TX; 78	3721		1
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See	***************************************	of Texas, complete Schedule T)
	panelly dee the (ade manachers)	10 Employer (See	instructions)	
Date	Full name of contributor Dovt-of-state PAC (ID#:	,	Amount of	In-kind contribution
_	William & Celia Mange		contribution (\$)	description (if applicable)
11/2/14				[
	Contributor address; City; State; Zip Code		150.00	
	7104 Spurlock Dr.; Austin	TX: 78731		
	, and a paragraph of the paragraph of th	111, 10,31	/If travel outside	of Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See I		or rexas, complete Schedule 1)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of	In-kind contribution
	Terron McDonald		contribution (\$)	description (if applicable)
11/2/14	Contributor address; City; State; Zip Code		FA 00	
11/2/14	1900 Scofield Ridge Pkwy; A	Austin TY:	50.00	
	78727	Austin in,		! [
			(If travel outside	of Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions) e	Employer (See I	nstructions)	
Date	Full name of contributor out-of-state PAC (ID#:) .	Amount of	In-kind contribution
	Chester Beattie		contribution (\$)	description (if applicable)
11/2/14	Contributor address; City, State; Zip Code		250.00	
	4900 N. Lamar Blvd.; Austin 7	rx; 78751		
		-	(If trough publishs	of Toyon, nomelote Sebadula T
Principal occu	pation / Job title (See Instructions) e	Employer (See I		of Texas, complete Schedule T)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of	In-kind contribution
	Welds Creams		contribution (\$)	description (if applicable)
11/2/14	Nelda Spears Contributor address; City; State; Zip Code		100.00	
			100.00	,
	5581 Airport Blvd.; Austin 1	rx; 78751		! [
			(If travel outside	l of Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See I		
		•		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A

The	Instruction Guide explains how to complete thi	s form.	1 Total pages Sch	nedule A:
2 FILER NAME			3 ACCOUNT # (E	Ethics Commission Filers)
4 Date 11/2/14	5 Full name of contributor out-of-state PAC (ID#:_ Jerry Heare 6 Contributor address; City; State; Zip Code		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	9015 Mountain Ridge Dr; Austi	n TX; 78759		of Texas, complete Schedule T)
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See	***************************************	or remor, complete contended ()
Date 11/2/14	Full name of contributor out-of-state PAC(ID#_ Michael & Cynthia Clement Contributor address; City; State; Zip Code 400 West Anderson Ave.; Austi		Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occu	pation / Job title (See Instructions)	Employer (See I		of Texas, complete Schedule T)
Date 11/2/1	Full name of contributor out-of-state PAC (ID#:_ Jenesta Sturrup Contributor address; City; State; Zip Code		Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occup	pation / Job title (See Instructions) Therapist	Employer (See I	note (etions)	of Texas, complete Schedule T) Lf employed
Date 11/2/14	Full name of contributor out-of-state PAC (ID#_ Ilean Galloway Contributor address; City; State; Zip Code	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	206 E. 9th St.; Austin TX; 78 pation / Job title (See Instructions)	701 Employer (See I		of Texas, complete Schedule T)
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occup	pation / Job title (See Instructions)	Employer (See II	***	of Texas, complete Schedule T)
	ATTACH ADDITIONAL CODIES O	E TIUS COUEDUS E	A & h1 pripring many	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

LOANS	ssion P.O. Box 12070 Austir	n, Texas 78711-2070 (512) 463-5800	SCHEDULE E
The	Instruction Guide explains how to comp	olete this form.	1 Total pa	ages Schedule E:
2 FILER NAME Sheryl Cole				JNT # (Ethics Commission Filers
4 TOTA	AL OF UNITEMIZED LOANS:	\$ \$\display\$ \$\display\$	⇒	\$
5 Date of loan	7 Name of lender	out-of-state PAC (ID#:)	9 Loan Amount (\$)
11/18/14	Sheryl Cole			1,600.00
6 Is lender a financial	8 Lender address; City; State;	Zip Code		10 Interest rate
Institution?	4101 Wildwood Ln; Austin T	K; 78722		11 Maturity date
12 Principal occupat	on / Job title (See Instructions)	13 Employer (See Instructions)	L
Mayor Pro Tem		City of Austin		
14 Description of Col	lateral	15 Check if personal funds wer	e deposited	l into political account
Л попе		7		
16 GUARANTOR INFORMATION	17 Name of guarantor			19 Amount Guaranteed (\$)
лоt applicable	18 Guarantor address; City;	State; Zip Code		
20 Principal Occupat	ion (See Instructions)	21 Employer (See Instructions)	·	
Date of loan	Name of lender [out-of-state PAC (ID#;)	Loan Amount (\$)
Is lender a financial Institution?	Lender address; City; State;	Zip Code		Interest rate
Y N				Maturity date
Principal occupati	on / Job title (See Instructions)	Employer (See Instructions)		
Description of Colla	ateral	Check if personal funds were	deposited	into political account
none			·	·
GUARANTOR INFORMATION	Name of guarantor	1		Amount Guaranteed (\$)
not applicable	Guarantor address; City;	State; Zip Code		
Principal Occupati	on (See Instructions)	Employer (See Instructions)		
If lend	ATTACH ADDITIONAL COPI der is out-of-state PAC, please see inst	ES OF THIS SCHEDULE AS NE ruction guide for additional re		quirements.

POLITICAL EXPENDITURES

SCHEDULE F

FOLITICAL	EXPENDITURES	SCHEDULE F
	EXPENDITURE CATEGORIES	FOR BOX 8(a)
Adverlising Expense Accounting/Banking Consulting Expense Event Expense Fees	Gift/Awards/Memorials Expense Salaries/Wages/C Legal Services Solicitation/Fundra Food/Beverage Expense Travel In District Polling Expense Travel Out Of Dis Printing Expense Office Overhead/F The Instruction Guide explains how to	ontract Labor aising Expense Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Rental Expense OTHER (enter a category not listed above)
1 Total pages Schedule F:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
4 Date	5 Payee name	
10/27/14	Buying Time Media, LLC	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
15,000.00	650 Massachusetts Ave; Washing	ton DC; 20001
8 PURPOSE OF	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T) Television
EXPENDITURE	Advertising	Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/6	Candidate / Officeholder name DH	Office sought Office held
Date	Payee name	
10/30/14	NGP VAN	
Amount (\$)	Payee address; City; State; Zip Code	
75.00	1101 15 St. NW; Washington DC;	20005
PURPOSE OF	Category (See categories listed at the top of this schedule)	' Description (If travel outside of Texas, complete Schedule T) software
EXPENDITURE	Solicitation/Fundraising	Check if Austin, TX, afficeholder living expense
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name DH	Office sought Office held
Date	Payee name	
10/30/14	Austin Chronicle	•
Amount (\$)	Payee address; Cily; Slate; Zip Code	
1,845.00	4000 N. IH-35; Austin TX; 7875	1
PURPOSE OF	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) Print Ad
EXPENDITURE	Advertising	Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name DH	Office sought Office held
Date	Payee name	1
10/30/14	Buying Time Media, LLC	
Amount (\$)	Payee address; City; State; Zip Code	WARRING WORLD TO THE TOTAL TO T
5,000	650 Massachusetts Ave; Washin	gton DC; 20001
PURPOSE OF	Category (See categories listed at the top of this schedule)	Description (If Iravel outside of Texas, complete Schedule T) Television
EXPENDITURE	Adversting	Check if Austin, TX, afficeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/	Candidate / Officeholder name OH	Office sought Office held
, A.	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

Advertising Expense	EXPENDITURE CATEGORIES Gift/Awards/Memorials Expense Salaries/Wages/C	_	
Accounting/Banking	Legal Services Solicitation/Funda		Loan Repayment/Reimbursement Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense Travel In District	t	Contributions/Donations Made By
Event Expense	Polling Expense Travel Out Of Di	istrict	Candidate/Officeholder/Political Committee
Fees	Printing Expense Office Overhead/ The Instruction Guide explains how to	•	OTHER (enter a category not listed above)
1 Total pages Schedule F:	2 FILER NAME	, warrant	
1 . William Program	& FILLIA WOUNG		3 ACCOUNT # (Ethics Commission Filers)
4 Date	5 Payee name		
10/30/14	Chez Zee		
6 Amount (\$)	7 Payee address; City: State; Zip Code		
280.37	5406 Balcones Dr; Austin TX; 78	3731	
8 PURPOSE	(a) Category (See categories listed at the top of this schedule)		(If travel outside of Texas, complete Schedule T)
OF EXPENDITURE		Endorsement a	nnouncement reception
—	Food/Beverage Expense	Check if Au	ustin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name OH	Office sought	t Office held
Date	Payee name .		
11/3/14	Best Buy		
Amount (\$)	Payee address; City; State; Zip Code		
55.13	1201 Barbara Jordan Blvd; Austin	TX; 78723	
PURPOSE	Category (See categories listed at the top of this schedule)	Description ((If travet outside of Toxas, complete Schedule T)
OF EXPENDITURE		Phone	minutes
CAFENDITO	Office overhead	Check if Au	ustin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name OH	Office sought	t Office held
Date	Payee name		
11/3/14	NGP VAN		
Amount (\$)	Payee address; City; State; Zip Code		
400.00	1101 15 St. NW; Washington DC; 2	<u> ሰ</u> ለሰፍ	
	· · · · · · · · · · · · · · · · · · ·	T	Of secret susside of Tayan complete School In Th
PURPOSE OF	Category (See categories listed at the top of this schedule)	Description (I	(If travel outside of Texas, complete Schedule T) re
EXPENDITURE	Solicitation/Fundraising		ustin, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	The state of the s
expenditure to benefit C/O	H		
Date	Payee name		
11/3/14	The Villager		
Amount (\$)	Payee address; City; State; Zip Code		
504.00	4132 E. 12th St; Austin TX; 787	21	
PURPOSE	Category (See categories listed at the top of this schedule)	Description ((If travel outside of Texas, complete Schedule T) Ad
OF EXPENDITURE	Advertising	1 —	AQ ustin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name	Office sought	· • · · · · · · · · · · · · · · · · · ·
expenditure to benefit of	•		
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS N	IEEDED

P.O. Box 12070

POLITICAL	EXPENDITURES		SCHEDULE F
	EXPENDITURE CAT	EGORIES FOR BOX 8	(a)
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	Gift/Awards/Memorials Expense Sala Legal Services Solii Food/Beverage Expense Trav Polling Expense Trav	aries/Wages/Contract Labor citation/Fundraising Expense ret In District ret Out Of District ce 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)
1 Total pages Schedule F:	2 FILER NAME	dilla now to complete time	3 ACCOUNT # (Ethics Commission Filers)
15.11			,
4 Date	5 Payee name		
11/4/14	Kevin Opp		
6 Amount (\$)	7 Payee address; City; State;	Zip Code	
2,800.00	1703 Antler Dr; Austin T	K; 78741	
8 PURPOSE OF EXPENDITURE	(a) Category (See calegories listed at the top of this	schedule) (b) Description	on (If travel outside of Texas, complete Schedule T)
	Salary	Check	if Austin, TX, afficeholder living expense
9 Complete ONLY if direct expenditure to benefit C/0	Candidate / Officeholder name OH	Office sou	ight Office held
Date	Payee name		
11/6/14	Clive Bar		
Amount (\$)	Payee address; City; State;	Zip Code	
114.00	609 Davis St; Austin TX;	78701	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this		on (If travel outside of Texas, complete Schedule T) ction watch
Best between with	Food/Beverage	Check	if Austin, TX, officeholder living expense
Camplete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name DH	Office sou	ght Office held
Date	Payee name		
11/7/14	Casey Prichard		
Amount (\$)	Payee address; City; State;	Zip Code	***************************************
2,250.00	7303 Woodhollow Dr; Austi	n TX; 78731	
PURPOSE	Category (See categories listed at the top of this	schedule) Descriptio	on (If travel outside of Texas, complete Schedule T)
OF EXPENDITURE	Salary	Check	if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name	Office sou	ght Office held
Date	Payee name		
11/13/14	Kevin Opp		
Amount (\$)	Payee address; City; State;	Zip Code	
367.00	1703 Antler Dr; Austin TX	; 78741	
PURPOSE	. Category (See categories listed at the top of this	schedule) Descriptio	on (If travel outside of Texas, complete Schedule T)
OF EXPENDITURE	Salary	Checki	if Auslin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/G	Candidate / Officeholder name	Office soug	ght Office held
	ATTACH ADDITIONAL CODIE	C OF THIS COUEDIN F A	ALEFREN

POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Gift/Awards/Memorials Expense Salaries/Wages/Contract Labor Loan Repayment/Reimbursement Accounting/Banking Solicitation/Fundraising Expense **Legal Services** Transportation Equipment & Related Expense Consulting Expense Food/Beverage Expense Travel In District Contributions/Donations Made By Candidate/Officeholder/Political Committee Event Expense Polling Expense Travel Out Of District Fees Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule F: 2 FILER NAME 3 ACCOUNT # (Ethics Commission Filers) 4 Date 5 Payee name 11/14/14 Genevieve Van Cleve 6 Amount (\$) 7 Payee address; City: State; Zip Code 3,000.00 4104 Wildwood Rd; Austin TX; 78722 (a) Category (See categories listed at the top of this schedule) **PURPOSE** (b) Description (If travel outside of Texas, complete Schedule T) 8 OF **EXPENDITURE** Consulting Expense Check if Austin, TX, officeholder living expense Candidate / Officeholder name 9 Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Pavee name 11/14/14 Capital Area Progressive Democrats Payee address; City; State; Zip Code Amount (\$) 180.00 PO Box 413; Austin TX; 78767 Category (See categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE OF EXPENDITURE Check if Austin, TX, officeholder living expense Membership expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Pavee name Date 11/18/14 Message, Audience, Presentation City; State; Zip Code Amount (\$) Pavee address: 4,575.00 2400 S. 4th St; Austin TX; 78704 Description (If travel outside of Texas, complete Schedule T) Category (See categories listed at the top of this schedule) PURPOSE OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Date Payee name 11/18/14 Message, Audience, Presentation Amount (\$) Payee address; City; State; Zip Code 2,088.90 2400 S. 4th St; Austin TX; 78704 Category (See categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Cards/stationary OF **EXPENDITURE** Printing Expense Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL	EXPENDITURES	SCHEDULE F		
Advertising Expense Accounting/Banking	EXPENDITURE CATEGORIES Gift/Awards/Memorials Expense Salaries/Wages/C Legal Services Solicitation/Fundra	ontract Labor Loan Repayment/Reimbursement		
Consulting Expense Event Expense Fees	Food/Beverage Expense Travel In District Polling Expense Travel Out Of Dis Printing Expense Office Overhead/F The Instruction Guide explains how to	Rental Expense OTHER (enter a category not listed above)		
1 Total pages Schedule F:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)		
4 Date	5 Payee name			
11/18/14	Message, Audience, Presentat:	ion		
6 Amount (\$)	7 Payee address; City; State; Zip Code			
14,925.00	2400 S. 4th St; Austin TX;	78704		
8 PURPOSE OF	(a) Category (See categories listed at the top of this schedule)	(b) Description (If Iravel outside of Texas, complete Schedule T)		
EXPENDITURE	Polling expense	Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/	Candidate / Officeholder name OH	Office sought Office held		
Date	Payee name			
11/18/14	Message, Audience, Presentat:	ion		
Amount (\$)	Payee address; City; State; Zip Code			
8,000.00	2400 S. 4th St; Austin TX; 78	† · · · · · · · · · · · · · · · · · · ·		
PURPOSE OF	Category (See categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T)			
EXPENDITURE	Advertising expense	TV production Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name DH	Office sought Office held		
Date	Payee name			
11/18/14	Message, Audience, Presentat:	ion		
Amount (\$)	Payee address; City; State; Zip Code			
18,645.00	2400 S. 4th St; Austin TX; 78	3704		
PURPOSE OF	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) Mailer		
EXPENDITURE	Printing expense	Check if Austin, TX, officeholder living expense		
Complete <u>QNLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name DH	Office sought Office held		
Date	Payee name	·		
11/24/14	USPS			
Amount (\$)	Payee address; City; State; Zip Code			
490.00	900 Blackson Ave; Austin TX;	78752		
PURPOSE OF	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) Postage		
EXPENDITURE	Office overhead	Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/	Candidate / Officeholder name OH	Office sought Office held		
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED		

POLITICAL	EXPENDITURES	SCHEDULE F	•
	EXPENDITURE CATEGORIES	FOR BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	Gift/Awards/Memorials Expense Salaries/Wages/C Legal Services Solicitation/Fundra Food/Beverage Expense Travel In District Polling Expense Travel Out Of Dis Printing Expense Office Overhead/F	ontract Labor Loan Repayment/Reimbursement sising Expense Transportation Equipment & Related Expens Contributions/Donations Made By Candidate/Officeholder/Political Commit Rental Expense OTHER (enter a category not listed above)	itee
1 Total pages Schedule F:	The Instruction Guide explains how to		
r void pages conduit :	CILLY MAINE	3 ACCOUNT # (Ethics Commission Fi	lers)
4 Date	5 Payee name		
11/24/14	Clear Wireless		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
57.46	Dept. CH 14365; Palatine IL;	60055	
8 PURPOSE OF	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)	
EXPENDITURE	055	Internet	
O Complete ONLY if discort	Office overhead Candidate / Officeholder name	Check if Austin, TX, afficeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/H		Office sought Office held	
Date	Рауев пате		***************************************
11/25/14	Casey Prichard		
Amount (\$)	Payee address; City; State; Zip Code		
295.00	7303 Woodhollow Dr; Austin TX	K; 78731	
PURPOSE OF	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)	
EXPENDITURE	Salary	Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/	Candidate / Officeholder name DH	Office sought Office held	
Date	Payee name		
11/26/14	Arthur Troilo III		
Amount (S)	Payee address; City; State; Zip Code		
562.00	700 E. 11th ST; Austin TX; 78	3701	
PURPOSE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)	
OF EXPENDITURE	Food/Beverage expense	fundraising event reimbursement Check if Auslin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name	Office sought Office held	
Date	Payee name		
11/26/14	Message, Audience, Presentati	Lon	
Amount (\$)	Payee address; City; State; Zip Code		
6,500.00	2400 S. 4th St; Austin TX 787	704	
	Category (See categories listed at the lop of this schedule)	Description (If Iravel outside of Texas, complete Schedule T)	
PURPOSE OF		Calis	
EXPENDITURE	Solicitation expense	Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/	Candidate / Officeholder name DH	Office sought Office held	
	ATTACH ADDITIONAL COPIES OF THIS S	SCHEDULE AS NEEDED	

POLITICAL EXPENDITURES

SCHEDULE F

	EXPENDITURE CATEGORIES	FOR BOX 8/a			
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	Gift/Awards/Memorials 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)		
4	The Instruction Guide explains how to	complete this re			
1 Total pages Schedule F:	2 FILER NAME		3 ACCOUNT # (Ethics Commission Filers)		
4 Date	5 Payee name	···			
12/8/14	Premiere Political Consultin	g			
6 Amount (\$)	7 Payee address; City: State; Zip Code				
819.84	4805 Woodview Ave; Austin TX; 78	756			
8 PURPOSE OF	(a) Category (See categories listed at the top of this schedule)	(b) Description	(If travel outside of Texas, complete Schedule T)		
EXPENDITURE		call			
	Solicitation expense		Austin, TX, afficeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/I	Candidate / Officeholder name OH	Office sough	ht Office held		
Date	Payee name				
12/24/14	Clear Wireless				
Amount (\$)	Payee address; City; State; Zip Code	WESTER - 1.1.1.1.			
57.46	Dept. CH 14365; Palatine IL;	60055			
PURPOSE	Category (See categories listed at the top of this schedule)	Description	(If travel outside of Texas, complete Schedule T)		
OF EXPENDITURE		Inte	ernet		
E311 E11071 G11	Office overhead	Check if	Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/0	Candidate / Officeholder name DH	Office sough	nt Office held		
Date	Payee name				
12/24/14	Kevin Opp		•		
Amount (\$)	Payee address: City; State; Zip Code				
208.76	1703 Antler Dr; Austin TX; 7	8741			
PURPOSE	Category (See categories listed at the top of this schedule)	1 '	(If travel outside of Texas, complete Schedule T)		
OF EXPENDITURE	Advertising expense	1 —	Austin, TX, officeholder living expense		
Complete <u>QNLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name	Office sough	nt Office held		
Date	T Rayon name				
Date 12/30/14	Payee name NGP VAN				
Amount (\$)	Payee address; City; State: Zip Code				
150.00	 1101 15 St. NW; Washington De	C: 20005			
	Category (See categories listed at the top of this schedule)	T	(If travel outside of Texas, complete Schedule T)		
PURPOSE OF		1	l overage		
EXPENDITURE	Solicitation/Fundraising	Check if	Auslin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/	Candidate / Officeholder name OH	Office sough	nt Office held		
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

BANK RECONCILIATION

(To be filed by candidate, officeholder or campaign committee with the January 15th contribution and expenditure report)

Name of candidate, officeholder	r or campaign committee: <u>Sl</u>	neryl Cole
For each checking, savings or oth following information indicated		nt maintained during 2014, enter the ion, use a copy of this schedule.
The name of the financial institu	ation: <u>Prosperity Bank</u>	
Type of account: Checking Ac	ecout	
The beginning balance: 0		
The ending balance: 452.21		
Enter the following information December 31:	for checks issued on that acc	ount that have not cleared by
Date	Payee	Amount
•		
Enter the following information by the contributor's financial ins		utions and deposited but dishonored
Date of receipt	Contributor	Amount
1		
Amount of interest or dividends	earned:	
Office of the City Clerk, 20.36	Revised by th	e Ethics Review Commission 10/16/2012

Page I of 2

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

Date of deposit or withdrawal	Amount of deposit	Amount of withdrawal		

A listing of checks received that have not been deposited into any account by December 31:

Date of receipt	Contributor	Amount		

2015

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512)463-5800 TDD 1-800-735-2989 FORM C/OH CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT** COVER SHEET PG 1 1 ACCOUNT # (Ethics Commission filers) 2 PAGE# The C/OH INSTRUCTION GUIDE explains how to complete this form. 1 of #23)。 80000008 CANDIDATE / MS / MRS / MR FIRST MI OFFICE USE ONLY **OFFICEHOLDER** Amanda NAME S **Date Received** RECEIVED NICKNAME LAST SUFFIX Mandy Dealey ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE CANDIDATE / **OFFICEHOLDER** MAILING PO Box 300423 **ADDRESS** Date Hand-delivered or Date Postmaged Austin, TX 78703 Change of Address Receipt # Amount MS / MRS / MR **CAMPAIGN** FIRST М Date Processed TREASURER NAME Gary Date Imaged NICKNAME CAMPAIGN STREET ADDRES ZIP CODE TREASURER **ADDRESS** P.O. Box 68 (Residence or business) Austin, TX 7 **CAMPAIGN** AREA CODE TREASURER PHONE (512) 537-54 8 REPORT TYPE January 15 15th day after campaign treasurer appointment (officeholder only) July 15 nal report (Attach C/OH - FR) 9 PERIOD Day Day Year COVERED **THROUGH** 12/07/2014 12/31/2014 10 ELECTION ELECTION DATE ELECTION TYPE Month Day Year Runoff X General Primary Special 12/16/2014 11 OFFICE OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) City Council, District 10 **GO TO PAGE 2**

2015

P.O. Box 12070 (512)463-5800 TDD 1-800-735-2989 Texas Ethics Commission Austin, Texas 78711-2070 CANDIDATE / OFFICEHOLDER FORM C/OH CAMPAIGN FINANCE REPORT COVER SHEET PG 1 1 ACCOUNT# 2 PAGE# The C/OH INSTRUCTION GUIDE explains how to complete this form. (Ethics Commission filers) 1 of 数3) 8000000 OFFICE USE ONLY MS / MRS / MR CANDIDATE / FIRST м OFFICEHOLDER Amanda NAME Date Received NICKNAME LAST SUFFIX Mandy Dealey ADDRESS / PO BOX APT / SUITE #: CITY: STATE: ZIP CODE CANDIDATE / **OFFICEHOLDER** MAILING PO Box 300423 Date Hand-delivered or Date Postmaned **ADDRESS** Austin, TX 78703 Change of Address Receipt # Amount CAMPAIGN MS / MRS / MR FIRST М Date Processed TREASURER Gary NAME Date Imaged NICKNAME LAST SUFFIX Valdez **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #: CITY: STATE: ZIP CODE TREASURER ADDRESS P.O. Box 685008 Austin, TX 78768 (Residence or business) CAMPAIGN AREA CODE PHONE NUMBER EXTENSION **TREASURER** (512) 537-5473 PHONE 8 REPORT TYPE January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only) 8th day before election Exceeded \$500 limit Final report (Attach C/OH - FR) 9 PERIOD Day Year Day Year COVERED **THROUGH** 12/07/2014 12/31/2014 10 ELECTION ELECTION DATE ELECTION TYPE Month Day Year Primary Runoff X General Special 12/16/2014 11 OFFICE 12 OFFICE SOUGHT (if known) OFFICE HELD (if any) City Council, District 10 **GO TO PAGE 2**

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

13 C/OH NAME Deale	ey, Amanda		14 ACCOUNT # 00000008	(Ethics Commission filers)		
15 NOTICE FROM	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					
POLITICAL COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME Austin Firefighters Public Safety Fund	•			
	GENERAL	COMMITTEE ADDRESS 7537 Cameron Rd. Austin, TX 78752				
_	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME Denzer, Douglas				
☑ additional pages		COMMITTEE CAMPAIGN YEE ASURER ADDRESS 7537 Cameron Rd. Austin, TX 78752				
16 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	585.00		
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	17,535.00		
EXPENDITURE TOTALS	3. TOTAL P	OLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZE	\$	100.81		
	4. TOTAL F	POLITICAL EXPENDITURES	\$	48,509.23		
CONTRIBUTION BALANCE		OLITICAL CONTRIBUTIONS MAINTAINED AS OF THE Y OF THE REPORTING PERIOD	\$	768.77		
OUTSTANDING LOAN TOTALS		RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE Y OF THE REPORTING PERIOD	\$	35,100.00		

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 Captidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said

, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Title of officer administering oath

CANDIDATI	E / OFFICE		EPORT:			<u> </u>	ORM C/OH
NOTICE FROM						Page 3 of 27	ADDENDUM
C/OH NAME Dealey,	Amanda			Park to the state of the state			ics Cammission filers)
17 NOTICE FROM POLITICAL	have been made with	itice of political expenditure out the candidate's or offi by receive notice of such a	ceholder's knowled				
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME	Austinites for	Equity			
	GENERAL	COMMITTEE ADDRESS	1812 Centre Ste. 310 Austin, TX 78				
	X SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME					
		COMMITTEE CAMPAIGN TREASURER ADDRESS	15408 Interla Austin, TX 78				
NOTICE FROM POLITICAL	have been made with	tice of political expenditur out the candidate's or offi y receive notice of such e	ceholder's knowled				
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME	Sierra Club P	olitical Comn	nittee of Te	exas	***************************************
	X GENERAL	COMMITTEE ADDRESS	615 Willow San Antonio,	TX 78202			
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME	Gonzalez, He	ector			
		COMMITTEE CAMPAIGN TREASURER ADDRESS	615 Willow San Antonio,	TX 78202		***************************************	

SCHEDULE A

	The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 1/14 Report: 4/27		
2	FILER NAME	Dealey, Amanda		3 ACCOUNT # 00000008	(Ethics Commission filers)	
4	Date	5 Full name of contributor	¥)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	12/08/2014	6 Contributor address; City; State; Zip Code 1611 Northwood Rd Austin, TX 78703-1945	,	\$350.00	 	
				(If travel outside of	Texas, complete Schedule T)	
9	Principal occupation / Job title (See Instructions) Real Estate		10 Employer (See In Austin Retail Pa			
	Date	Full name of contributor	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	12/07/2014	Contributor address; City; State; Zip Code 812 San Antonio Ste, 401	• • • • • • • • • • • • • • • • • • • •	\$100.00	 	
		Austin, TX 78701		(If travel outside of	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)			Employer (See Instructions)			
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)	
	12/08/2014	Contributor address; City; State; Zip Code 212 Lavaca St Ste 300		\$350.00	 	
		Austin, TX 78701-3955		(If travel outside of	Texas, complete Schedule T)	
	Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) None			
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	12/08/2014	Contributor address; City; State; Zip Code 212 Lavaca St Ste 300 Austin, TX 78701-3955		\$350.00	 	
				(If travel outside of	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) President			Employer (See Instructions) Stratus Properties			
	Date	Full name of contributor	£)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	12/15/2014	Contributor address; City; State; Zip Code 19907 Kennemer Dr. Pflugerville, TX 78560		\$350.00	 	
				// // // // // // // // // // // // //		
	Principal accura	ation / Joh title (See Instructions)	Employer (See In:	·	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Central Texas Division Manager			Dannenbaum E			

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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/	14 Report: 5/27		
2	FILER NAME	Dealey, Amanda		3 ACCOUNT# 00000008	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID Bailey, Debra	¥)	7 Amount of contribution (\$)	1 8 In-kind contribution description (if applicable)		
	12/12/2014	6 Contributor address; City; State; Zip Code 8500 Andreas Cv Austin, TX 78759-7926		\$100.00	!		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occur	pation / Job title (See Instructions)	10 Employer (See In	structions)			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
-	12/10/2014	Contributor address; City; State; Zip Code 4004 Merimac Austin, TX 78731-1307	• • • • • • • • • • • • • • • • • • • •	\$100.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)			
				,			
	Date	Full name of contributor	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/08/2014	Contributor address; City; State; Zip Code 6116 Pebble Garden Ct Austin, TX 78739-1738		\$350.00	[
	:			(If travel outside of	Texas, complete Schedule T)		
	Principal occup Lawyer	ation / Job title (See Instructions)	Employer (See In Self				
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/11/2014	Contributor address; City; State; Zip Code 1518 Mohle Dr Austin, TX 78703-1936		\$250.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Architect	ation / Job title (See Instructions)	Employer (See In Baldridge Archi				
	Date	Full пате of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/10/2014	Contributor address; City; State; Zip Code 504 Terrace Mountain Dr West Lake Hills, TX 78746-3638	•	\$250.00	i -		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Lawyer	ation / Job title (See Instructions)	Employer (See In: Hughes Vander				

	The Instructi	ON GUIDE explains how to complete this form.	- S. Allen - de la 	1 PAGE#	44 Danada 6/07		
2	FILER NAME	Dealey, Amanda		3 ACCOUNT # 00000008	14 Report: 6/27 (Ethics Commission filers)		
4	Date	5 Full name of contributor ut-of-state PAC (ID: Bryant, Samuel	¥)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	12/12/2014	6 Contributor address; City; State; Zip Code 11023 Pencewood Ct Austin, TX 78750-3712	• • • • • • • • • • • • • • • • • • • •	\$100.00	 		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)			
	Date	Full name of contributor	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/15/2014	Contributor address; City; State; Zip Code 5326 McCulloch Cir. Houston, TX 77056	• • • • • • • • • • • • • • • • • • • •	\$350.00	 		
				<u> </u>	Texas, complete Schedule T)		
	Principal occup Engineer	pation / Job title (See Instructions)	Employer (See In Dannenbaum E				
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/08/2014	Contributor address; City; State; Zip Code 1115 Wild Basin Ldg West Lake Hills, TX 78746-2707	• • • • • • • • • • • • • • • • • • • •	\$350.00	! ! ! .		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup CEO	pation / Job title (See Instructions)	Employer (See In People Pattern	structions)			
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/12/2014	Contributor address; City; State; Zip Code 2601 Great Oaks Pkwy Austin, TX 78756-2909		\$150.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principa) occup	ation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor ☐ out-of-state PAC (ID# Cunningham, William	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/12/2014	Contributor address; City; State; Zip Code 1412 Barton Creek Blvd. Austin, TX 78735		\$100.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			

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	The INSTRUCTI	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 4/	14 Report: 7/27		
2	FILER NAME	Dealey, Amanda		3 ACCOUNT # 00000008	(Ethics Commission filers)		
4	Date	5 Full name of contributor	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	12/14/2014	6 Contributor address; City; State; Zip Code 700 Lavaca St Ste 1400	***************************************	\$100.00	 		
		Austin, TX 78701-3102		(If travel outside of	Texas, complete Schedule T)		
9	Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)	1.000		
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/07/2014	Contributor address; City; State; Zip Code 14402 Sir Barton St San Antonio, TX 78248-1145		\$350.00	 		
		Carryttonio, 17775245-1145		(If travel outside of	Texas, complete Schedule T)		
	Principal occur	Leation / Job title (See Instructions)	Employer (See In	1	Toxas, complete concepts ()		
	HVAC Repair		Self Employed	sudcilons)			
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/07/2014	Contributor address; City; State; Zip Code 14402 Sir Barton St		\$350.00	 		
		San Antonio, TX 78248-1145		(If travel outside of	Texas, complete Schedule T)		
	Principal occup Teacher	ation / Job title (See Instructions)	Employer (See In NEISD	structions)			
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/15/2014	Contributor address; City; State; Zip Code 3100 W. Alabama St. Houston, TX 77098	•••••	\$350.00	1 . 1 1		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Chairman	ation / Job title (See Instructions)	Employer (See In Dannenbaum E				
	Date	Full name of contributor ut-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/08/2014	Contributor address; City; State; Zip Code 2604 Stratford Dr Austin, TX 78746-4623	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$350.00	 		
				(If travel outcide of	Texas, complete Schedule T)		
	Principal occupi Investor	ation / Job title (See Instructions)	Employer (See In: Q1Media		roadaj complete deficació ()		

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	The Instruction	ON GUIDE explains how to complete this form	n.		1 PAGE# Schedule: 5/	14 Report: 8/27	
2	FILER NAME	. Dealey, Amanda			3 ACCOUNT# 00000008	(Ethics Commission filers)	
4	Date	5 Full name of contributor ut-of-state Dwight, Diane	e PAC (ID:)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	12/12/2014	6 Contributor address; City; State; 25315 State Highway 71 W Spicewood, TX 78669-2542		••••••	\$100.00	! ! !	
					(If travel outside of	Texas, complete Schedule T)	
9	Principal occup	ation / Job title (See Instructions)		10 Employer (See In	structions)		
	Date	Full name of contributor	e PAC (ID#	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	12/11/2014	Contributor address; City; State; 301 Brazos St Unit 1303	Zip Code	• • • • • • • • • • • • • • • • • • • •	\$100.00	! ! !	
		Auslin, TX 78701-4629			(If traval outside of	Texas, complete Schedule T)	
┝	Principal occup	ation / Job title (See Instructions)		Employer (See In	<u> </u>	Texas, complete schedule ()	
	Date	Full name of contributor	e PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	12/13/2014	Contributor address; City; State; 2500 Flora Cv Austin, TX 78746-6902	Zip Code		\$100.00	; 1 1	
					(If traval outside of	Texas, complete Schedule T)	
-	Principal occup	ation / Job title (See Instructions)		Employer (See In	<u> </u>	Texas, complete scriedule 1/	
		,			,		
	Date	Full name of contributor	e PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	12/12/2014	Contributor address; City; State; 1402 Preston Ave Austin, TX 78703-1902	Zip Code		\$100.00	! 	
				,	different and the of	Tauran mammulaka Kabadula 7\	
	Principal occup	ation / Job title (See Instructions)	1	Employer (See In		Texas, complete Schedule T)	
					,		
	Date	Full name of contributor ut-of-state	e PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
!	12/11/2014	Contributor address; City; State; 6618 Sitio Del Rio Blvd Bldg C	Zip Code		\$350.00	 	
		Austin, TX 78730-1143				-	
					L	Texas, complete Schedule T)	
	Principal occupa Paralegal	ation / Job title (See Instructions)	,	Employer (See In: Law Offices of \			
	•						

The Instructi	ION GUIDE explains how to complete this form.		1 PAGE# Schedule: 6/	14 Report: 9/27		
2 FILER NAME	Dealey, Amanda		3 ACCOUNT# 00000008	(Ethics Commission filers)		
4 Date	5 Full name of contributor	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
12/11/2014	6 Contributor address; City; State; Zip Code 6618 Sitio Del Rio Blvd	• • • • • • • • • • • • • • • • • • • •	\$350.00	 		
	Bldg C Austin, TX 78730-1143	•	(If travel outside of	Texas, complete Schedule T)		
9 Principal occu Attorney	pation / Job title (See Instructions)	10 Employer (See In Law Offices of \	structions)			
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
12/11/2014	Contributor address; City; State; Zip Code 7913 Mesa Trails Cir		\$100.00	1 1		
	Austin, TX 78731-1446		(if travel outside of	Texas, complete Schedule T)		
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)			
Date	Full name of contributor	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
12/09/2014	Contributor address; City; State; Zip Code		\$100.00	 		
	Austin, TX 78702-3225		(If travel outside of	Texas, complete Schedule T)		
Principal occu	oation / Job title (See Instructions)	Employer (See In	structions)			
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
12/08/2014	Contributor address; City; State; Zip Code 1300 Alta Vista Ave Austin, TX 78704-2515		\$100.00	 		
			(if travel outside of	Texas, complete Schedule T)		
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)			
Date	Full name of contributor ☐ out-of-state PAC (ID# Hill, Rae	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
12/15/2014	Contributor address; City; State; Zip Code 2303 Windsor Rd Austin, TX 78703-3116		\$350.00	 		
			(If travel outside of	Texas, complete Schedule T)		
Principal occup Ranching	ation / Job title (See Instructions)	Employer (See In: Self	l			
			· · · · · · · · · · · · · · · · · · ·			

The Instruct	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 7/	14 Report: 10/27
2 FILER NAME	Dealey, Amanda		3 ACCOUNT# 00000008	(Ethics Commission filers)
4 Date	5 Full name of contributor	<u></u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
12/15/2014	6 Contributor address; City; State; Zip Code 2303 Windsor Rd Austin, TX 78703-3116		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occu Real Estate	pation / Job title (See Instructions)	10 Employer (See In HPI	structions)	
Date	Full name of contributor	<u>#)</u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
12/08/2014	Contributor address; City; State; Zip Code 5321 Western Hills Dr Austin, TX 78731-4852		\$150.00	1
			(If travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In	<u> </u>	,
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
12/09/2014	Contributor address; City; State; Zip Code 8709 Ridgehill Dr Austin, TX 78759-7342		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
12/12/2014	Contributor address; City; State; Zip Code PO Box 4903 Austin, TX 78765-4903		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Grocery Store	pation / Job title (See Instructions) e	Employer (See In Mini's Food Mai		
Date	Full name of contributor ☐ out-of-state PAC (ID# Husch Blackwell State PAC	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
12/10/2014	Contributor address; City; State; Zip Code 111 Congress Ave Ste 1400		\$350.00	
	Austin, TX 78701-4093		(If travel outside of	Texas, complete Schedule T)
Principal occup	lation / Job title (See Instructions)	Employer (See In	<u> </u>	

The Instruction Guide expla	ins how to complete this form.		1 PAGE # Schedule: 8/	14 Report: 11/27		
2 FILER NAME Dealey, An	nanda		3 ACCOUNT# 00000008	(Ethics Commission filers)		
4 Date 5 Full πame Husch Blac	e of contributor	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
12/10/2014 6 Contribut 4801 Main St	• • • • • • • • • • • • • • • • • • • •		\$350.00	<u> </u>		
Ste 1000 Kansas City,	MO 64112-2551		(If travel outside of	Texas, complete Schedule T)		
9 Principal occupation / Job title	(See Instructions)	10 Employer (See In	structions)			
Date Full name Kerr, Chris	e of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
12/11/2014 Contribut 4115 Abingdo Garland, TX			\$350.00	 		
			<u> </u>	Texas, complete Schedule T)		
Principal occupation / Job title EVP	(See Instructions)	Employer (See In Force Multiplier				
Date Full name Kerr, Heath	e of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
12/11/2014 Contribute 4115 Abingdo Garland, TX			\$350.00	 		
Garianu, TX	75045-7251		(If travel outside of	Texas, complete Schedule T)		
Principal occupation / Job title Homernaker	(See Instructions)	Employer (See In: none	structions)			
Date Full name Lambrecht,	of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
12/08/2014 Contribute 6404 Alasan Austin, TX 78		• • • • • • • • • • • • • • • • • • • •	\$350.00	I. I I		
			(If travel outside of	Texas, complete Schedule T)		
Principal occupation / Job title CEO	(See Instructions)	Employer (See In: Planned Parent	structions) hood of Greater T	exas		
Date Full name Larson, Doh	of contributor	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
12/07/2014 Contribute 1009 Ellingso Austin, TX 78			\$350.00			
•		,	(If trave) outside of	Texas, complete Schedule T)		
Principal occupation / Job title Attorney	(See Instructions)	Employer (See Ins Texas Classroo				

	The Instructi	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 9/	14 Report: 12/27		
2	FILER NAME	Dealey, Amanda		3 ACCOUNT# 00000008	(Ethics Commission filers)		
4	Date	5 Full name of contributor	‡)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	12/07/2014	6 Contributor address; City; State; Zip Code 12 E 92nd St Apt 3	• • • • • • • • • • • • • • • • • • • •	\$200.00	 		
		New York, NY 10128-0652		(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Clinical Psyc	pation / Job title (See Instructions) hologist	10 Employer (See In Fordham Unive				
	Date	Full name of contributor	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/11/2014	Contributor address; City; State; Zip Code 7122 Royal Ln Dallas, TX 75230-3608		\$350.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Homemaker	pation / Job title (See Instructions)	Employer (See In none	structions)			
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/11/2014	Contributor address; City; State; Zip Code 7122 Royal Ln		\$350.00	 		
		Dallas, ŤX 75230-3608		(If travel outside of	Texas, complete Schedule T)		
	Principal occup Chairman	pation / Job title (See Instructions)	Employer (See In Force Multiplier				
	Date	Full name of contributor □ out-of-state PAC (ID# Lewis, Carolyn	}	Amount of contribution (\$)	in-kind contribution description (if applicable)		
	12/10/2014	Contributor address; City; State; Zip Code 101 Colorado St Apt 3208 Austin, TX 78701-4306		\$350.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Chair	ation / Job title (See Instructions)	Employer (See In: Lewco Interests				
	Date	Full name of contributor ☐ out-of-state PAC (ID# Lindelow, Britt)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/10/2014	Contributor address; City; State; Zip Code 2502 Bridle Path Austin, TX 78703-3212		\$350.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Management	ation / Job title (See Instructions) Consultant	Employer (See In	structions)			

	The INSTRUCTION	ON GUIDE explains how to com	nplete this form.		1 PAGE# Schedule: 10	0/14 Report: 13/27	
2	FILER NAME	Dealey, Amanda	•		3 ACCOUNT# 00000008	(Ethics Commission filers)	
4	Date	5 Full name of contributor Loewy, Adam	out-of-state PAC (ID	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	12/07/2014	6 Contributor address; 111 Congress Ave Ste 400 Austin, TX 78701-4143	City; State; Zip Code	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$350.00		
<u></u>	Dringinal agour	L pation / Job title (See Instruction	no.\	10 Employer (See In	L		
9	Lawyer	alion / Job lide (Gee manuclio)		Loewy Law Firm			
	Date	Full name of contributor Lorenz, Sheridan	out-of-state PAC (ID:	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	12/09/2014	Contributor address; 3703 River Rd Ste A	City; State; Zip Code		\$350.00		
		Austin, TX 78703-1036				_	
					<u> </u>	Texas, complete Schedule T)	
	Principal occup Hospitality Ex	eation / Job title (See Instruction recutive	ns)	Employer (See In Mitchell Family			
	Date	Full name of contributor MacKinnon, Richard	ut-of-state PAC (ID)	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	12/12/2014	Contributor address; PO Box 4721 Austin, TX 78765-4721	City; State; Zip Code		\$200.00	 	
						Texas, complete Schedule T)	
	Principal occup Marketing	ation / Job title (See Instruction	ss)	Employer (See In Less Networks	structions)		
	Date	Full name of contributor Naeve, Chuck	out-of-state PAC (ID:	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	12/08/2014	Contributor address; 6507 Lost Cv Austin, TX 78746-7128	City; State; Zip Code		\$100.00	 	
	*				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instruction	s)	Employer (See In	structions)		
	Date	Full name of contributor Oliver, Guy	☐ out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	12/11/2014	Contributor address; 1200 Verdant Way Austin, TX 78746-6767	City; State; Zip Code	•••••	\$300.00	· 	
				,		Texas, complete Schedule T)	
	Principal occup. General Mana	ation / Job title (See Instruction ager	s)	Employer (See In: V&S Enterprise:		·	

L							
	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 11	/14 Report: 14/27		
2	FILER NAME	Dealey, Amanda		3 ACCOUNT# 00000008	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (IDI Oliver, Jason	'	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	12/07/2014	6 Contributor address; City; State; Zip Code 3267 Bee Cave Rd #107 & #92		\$300.00	 		
		Austin, TX 78746-6700		(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Land Manage	Loation / Job title (See Instructions) er	10 Employer (See In V&S Enterprise	structions)			
	Date	Full name of contributor	/)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/11/2014	Contributor address; City; State; Zip Code 1200 Verdant Way Austin, TX 78746-6767	• , • • • • • • • • • • • • • • •	\$300.00	 		
				(If travel outside of	Texas, complete Schedule T)		
┢		ation / Job title (See Instructions)	Employer (See In	structions)	,		
	Homemaker		None				
	Date	Full name of contributor	<i>‡</i>)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/11/2014	Contributor address; City; State; Zip Code 3267 Bee Cave Rd #107 & #92		\$300.00	 		
		Austin, TX 78746-6700		(If travel outside of	Texas, complete Schedule T)		
	Principal occup Owner	ation / Job title (See Instructions)	Employer (See In V&S Enterprise				
	Date	Full name of contributor	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/11/2014	Contributor address; City; State; Zip Code 3267 Bee Cave Rd #107 & #92 Austin, TX 78746-6700		\$300.00	 		
				L	Texas, complete Schedule T)		
	Principal occup Owner	ation / Job title (See Instructions)	Employer (See In V&S Enterprise				
	Date	Full name of contributor ut-of-state PAC (ID# Parken, Edward)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/12/2014	Contributor address; City; State; Zip Code 7917 W Rim Dr Austin, TX 78731-1244		\$100.00	 		
				(If traval autoids -5	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In-	<u> </u>	reads, complete deneguis ()		
	, ,	· · ·					

<u> </u>					
	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 12	//14 Report: 15/27
2	FILER NAME	Dealey, Amanda		3 ACCOUNT# 00000008	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Rosato, John)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	12/07/2014	6 Contributor address; City; State; Zip Code PO Box 59164 Austin, TX 78763		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Broker	pation / Job title (See Instructions)	10 Employer (See In SSG	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/07/2014	Contributor address; City; State; Zip Code 4707 Crestway Dr Austin, TX 78731-4712		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	Dation / Job title (See Instructions)	Employer (See In		Totals, campion continues ()
	Date	Full name of contributor out-of-state PAC (ID#)	Amount of cantribution (\$)	In-kind contribution description (if applicable)
	12/12/2014	Contributor address; City; State; Zip Code 800 W 5th St Apt 1102		\$350.00	
		Austin, TX 78703-5446		(If travel outside of	Texas, complete Schedule T)
	Principal occup professor	ation / Job title (See Instructions)	Employer (See In: University of Te		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/07/2014	Contributor address; City; State; Zip Code PO Box 5674 Austin, TX 78763-5674		\$100.00	
					Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)	
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/08/2014	Contributor address; City; State; Zip Code 6404 Alasan Cv Austin, TX 78730-2734		\$150.00 	[[
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)	

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE#			
⊢				Schedule: 13	/14 Report: 16/27		
2	FILER NAME	Dealey, Amanda		3 ACCOUNT # 00000008	(Ethics Commission filers)		
4	Date	5 Full name of contributor ut-of-state PAC (ID	# \	7 Amount of	8 In-kind contribution		
	·	Stuart, Donald	r	contribution (\$)	description (if applicable)		
	12/07/2014	6 Contributor address; City; State; Zip Code 4105 Long Champ Dr Austin, TX 78746-1150		\$100.00	 		
l				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)			
H	Date	Full name of contributor ut-of-state PAC (ID	4 1	Amount of	1 In bind and thuise		
	Date	Sullivan, David	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/15/2014	Contributor address; City; State; Zip Code 1710 Waterston Ave	* * * * * * * * * * * * * * * * * * * *	\$100.00	 		
		Austin, TX 78703-3937			l		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor	# \	Amount of	In-kind contribution		
	55.0	Sullivan, Michael	/	contribution (\$)	description (if applicable)		
	12/12/2014	Contributor address; City; State; Zip Code 1613 W 9th 1/2 St	* * * * * * * * * * * * * * * * * * * *	\$350.00	[[
		Austin, TX 78703-4711					
				1	Texas, complete Schedule T)		
	Principal occup Retired	ation / Job title (See Instructions)	Employer (See In Retired	structions)			
	Date ·	Full name of contributor ut-of-state PAC (ID	#)	Amount of	In-kind contribution		
		Swan, Laurie	•	contribution (\$)	description (if applicable)		
	12/08/2014	Contributor address; City; State; Zip Code 1611 Northwood Rd Austin, TX 78703-1945		\$350.00	 		
				(if travel outside of	Texas, complete Schedule T)		
	Principal occup Real Estate	ation / Job title (See Instructions)	Employer (See In Stratus Properti				
	5.4.	E. II					
	Date	Full name of contributor ut-of-state PAC (ID: Swartwood, Alison	7)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/10/2014	Contributor address; City; State; Zip Code 12604 Rush Creek Ln Austin, TX 78732-1992		\$350.00	<u> </u> 		
				(16 transal assistance)	Tavas samalata Cabada a T		
	Delegioni	ofice () ob title (Con Instruction)	F1- '0 '	-	Texas, complete Schedule T)		
	Principal occupi Homemaker	ation / Job title (See Instructions)	Employer (See In: Homemaker	structions)			

L					
	The Instruction	ON GUIDE explains how to complete this form.	•	1 PAGE# Schedule: 14	1/14 Report: 17/27
2	FILER NAME	Dealey, Amanda		3 ACCOUNT # 00000008	(Ethics Commission filers)
4	Date	5 Full name of contributor	*)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	12/10/2014	6 Contributor address; City; State; Zip Code 12604 Rush Creek Ln Austin, TX 78732-1992		\$350.00	[] [
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Marketing	ation / Job title (See Instructions)	10 Employer (See In Force Multiplier	structions)	
	Date	Full name of contributor	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/09/2014	Contributor address; City; State; Zip Code 8911 N Cap Tx Hwy Ste 2120		\$100.00	
		Austin, TX 78759-7200		(If travel outside of	Texas, complete Schedule T)
\vdash	Principal occup	ation / Job title (See Instructions)	Employer (See In	<u></u>	read, complete contents ()
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/07/2014	Contributor address; City; State; Zip Code 1206 W 8th St Austin, TX 78703-5279	• • • • • • • • • • • • • • • • • • • •	\$100.00	[[[
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	<u> </u>	
					•

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Gitts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

EXPENDITURE CATEGORIES

ense Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District

Fees	Printing Expense Office Overhead The Instruction Guide explains ho	/Rental Expense OTHER (enter a category not listed above)
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 1/10 F		00000008
4 Date	5 Payee name	
12/08/2014	Austin's Pizza	
6 Amount (\$)	7 Payee address City; State; Zip Code	A CONTRACTOR OF THE CONTRACTOR
\$87.11	1600 West 35th Street Austin, TX 78731	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T) [
OF	Food/Beverage Expense	1004 101 1014110010
EXPENDITURE		Check If Austin, TX, officeholder living expense
9 Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		
Date	Payee name	
12/15/2014	Austin's Pizza	
Amount (\$)	Payee address City; State; Zip Code	
\$98.12	1600 West 35th Street	
	Austin, TX 78731	
		Description ((the plantide of Table associate Cobed to T)
PURPOSE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) food for volunteers
OF EXPENDITURE	1 ood/ocverage Expense	
EXPENDITURE		Check if Austin, TX, officeholder living expense
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		
Date	Payee name	
12/16/2014	Bintliff, David	
Amount (\$)	Payee address City; State; Zip Code	
\$110.00	6303 Danwood Dr.	
4110.00	Austin, TX 78759	
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
OF	Salaries/Wages/Contract Labor	
EXPENDITURE		Check if Austin, TX, officeholder living expense
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		
Date	Payee name	
12/18/2014	Cashiola, Tyler	
Amount (\$)	Payee address City; State; Zip Code	
\$1,428.00	817 Peggy St.	
Ψ1,π20.00	Deer Park, TX 77536	
BUBBOSE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) Contract labor
PURPOSE OF	Salaries/Wages/Contract Labor	CORRIGORIADO
EXPENDITURE		
Complete ONLY if	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
direct expenditure to benefit C/OH	Cardidato / Ornochologi Hamo	Omoc sought. Omoc note.

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

EXPENDITURE CATEGORIES
ense Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District

Event Expense Fees	Polling Expense Travel Out Of District Printing Expense Office Overhead/Re The Instruction Guide explains how	ntal Expense OTHER (ente	Officeholder/Political Committee r a category not listed above)
4 BACE#	2 FILER NAME	to complete una form.	LA ACCOUNT # CTTO SI
1 PAGE#	Donton America		3 ACCOUNT # (TEC filers)
Schedule: 2/10 F	topoit ioiti		00000008
4 Date 12/11/2014	5 Payee name Central Market	•	
6 Amount (\$)	7 Payee address City; State; Zip Code		
\$23.94	4001 N Lamar Blvd. Austin, TX 78756		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description (if travel outside food for event	e of Texas, complete Schedule T)
		Check if Austin, TX, officehold	ler living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
12/15/2014	Central Market		
Amount (\$)	Payee address City; State; Zip Code	······································	
\$19.57	4001 N Lamar Blvd. Austin, TX 78756		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description (If travel outside food for event	e of Texas, complete Schedule T)
EXPENDITURE		Check If Austin, TX, officehold	ler living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
12/15/2014	Central Market		
Amount (\$)	Payee address City; State; Zip Code		
\$7.96	4001 N Lamar Blvd. Austin, TX 78756		
	Category (See Categories listed at the top of this schedule)	Description (If travel outside	of Texas, complete Schedule T)
PURPOSE	Event Expense	food for event	•
OF EXPENDITURE			
		Check if Austin, TX, officehold	ler living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
12/17/2014	Central Market		
Amount (\$)	Payee address City; State; Zip Code		
] ' '	4001 N Lamar Blvd.		
\$58.99	Austin, TX 78756		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description (If travel outside food for event	e of Texas, complete Schedule T)
		Check if Austin, TX, officehold	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

SCHEDULE F

Advertising E	xpense
Accounting/8	
Consulting E	
Event Expen	se

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

EXPENDITURE CATEGORIES

ense Salaries/Wages/Contract Labor
Solicitation/Fundralsing Expense
Travel In District
Travel Out Of District

Event Expense Fees	Polling Expense Travel Out Of D Printing Expense Office Overhead The Instruction Guide explains he	d/Rental Expense OTHER (enter a category not listed above)
1 PAGE#	2 FILER NAME	
Schedule: 3/10 F	T Deales Assessed	3 ACCOUNT # (TEC filers) 00000008
4 Date	5 Payee name	
12/29/2014	Clary, Anne	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$2,000.00	1510 Newning Austin, TX 78704	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
OF	Consulting Expense	consulting
EXPENDITURE		
		Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		
Date	Payee name	
12/18/2014	Cooper, Lucy	
Amount (\$)	Payee address City; State; Zip Code	
\$1,182.00	8500 Red Williow #A	
	Austin, TX 78736	
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) Contract labor
OF	Salaries/Wages/Contract Labor	contract labor
EXPENDITURE		—
Complete ONLY II	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
Complete ONLY if direct expenditure	Candidate / Onicendider hame	Office sought. Office field.
to benefit C/OH		
Date	Payee name	
12/18/2014	Dunning, Logan	
Amount (\$)	Payee address City; State; Zip Code	
\$1,125.00	8519 Cahill Dr. # 2505	
	Austin, TX 78729	
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
OF	Salaries/Wages/Contract Labor	Contract labor
EXPENDITURE		
Complete ONLY if	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
direct expenditure	Candidate / Officeriolder flame	Office sought, Office field.
to benefit C/OH		
. Date	Payee name	,
12/11/2014	GNI Strategies, LLC	
Amount (\$)	Payee address City; State; Zip Code	
\$20,000.00	P.O. Box 685008	
·	Austin, TX 78768	•
DIIDDOGG	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Accounting/Banking	Printing, postage & mailing services
EXPENDITURE		<u> </u>
	Ocadidate / Officeholders	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 (512)463-5800 TDD 1-800-735-2989 **POLITICAL EXPENDITURES** SCHEDULE F **EXPENDITURE CATEGORIES** Advertising Expense Accounting/Banking Consulting Expense Event Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense Travel In District Travel Out Of District OTHER (enter a category not listed above) Printing Expense Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. 1 PAGE# 2 FILER NAME 3 ACCOUNT # (TEC filers) Dealey, Amanda Schedule: 4/10 Report: 21/27 80000008 4 Date 5 Payee name **GNI Strategies, LLC** 12/16/2014 6 Amount (\$) City; State; Zip Code Payee address P.O. Box 685008 \$4,700.00 Austin, TX 78768 (a) Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) 8 (b) Description PURPOSE Printing, postage & mailing services **Printing Expense** OF EXPENDITURE Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Pavee name 12/18/2014 Hardwick, Andrew Amount (\$) Payee address City; State; Zip Code 417 Canterberry New Braunfels, TX 78132 \$1,386.00 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Consulting Salaries/Wages/Contract Labor EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Payee name Date Hardwick, Henry 12/18/2014 Payee address Amount (\$) City; State; Zip Code 2804 Rio Grande St. #203 \$1,260,00 Austin, TX 78705 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** contract labor Salaries/Wages/Contract Labor OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if Office saught: Office held: direct expenditure to benefit C/OH Date Payee name 12/16/2014 In Focus Campaigns Amount (\$) Payee address City; State; Zip Code PO Box 10726 \$239.61 Fort Worth, TX 76114 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T)

Telephone calls

Office sought:

Check if Austin, TX, officeholder living expense

PURPOSE

OF EXPENDITURE

Complete ONLY if

direct expenditure to benefit C/OH Advertising Expense

Candidate / Officeholder name

Office held:

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense

EXPENDITURE CATEGORIES

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

1 663	The Instruction Guide explains ho	
1 PAGE# 2 FILER NAME		3 ACCOUNT # (TEC filers)
Schedule: 5/10 Report: 22/27 Dealey, Amanda		00000008
4 Date	5 Payee name	
12/18/2014	Jacobson, Justin	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$1,254.00	1329 W. Mary St. #108 Austin, TX 78704	
	7,000,17,70704	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Salaries/Wages/Contract Labor	contract labor
OF EXPENDITURE		_
		Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		
Date	Payee name	
12/16/2014	Littlefield Consulting	
Amount (\$)	Payee address City; State; Zip Code	
\$1,400.00	PO Box 90591 Austin, TX 78709	
	, , , , , , , , , , , , , , , , , , , ,	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Consulting Expense	Consulting
EXPENDITURE		
	0 11 1 100 11	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		
Date	Payee name	
12/08/2014	Postmaster	
Amount (\$)	Payee address City; State; Zip Code 3507 N, Lamar Blvd	
\$44.10	Austin, TX 78705	
	·	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Printing Expense	postage
EXPENDITURE		
Complete ONLY if	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
direct expenditure to benefit C/OH		Silver sergiii.
	Payer roma	
Date 12/08/2014	Payee name Postmaster	
12/06/2014 Amount (\$)	Payee address City; State; Zip Code	
\$44.10	3507 N. Lamar Blvd	
φ 44 .10	Austin, TX 78705	
DUBBASE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Printing Expense	postage
EXPENDITURE		
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH	Carrest of the street of the s	Sind season.

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

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

EXPENDITURE CATEGORIES
ense Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District

Fees Fees	Polling Expense Iravel Out Of Dis Printing Expense Office Overhead/ The Instruction Guide explains ho	/Rental Expense OTHER (enter a category not listed above)
1 PAGE#	2 FILER NAME	3 ACCOUNT# (TEC filers)
Schedule: 6/10 F		00000008
4 Date	5 Payee name	
12/08/2014	Postmaster	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$44.10	3507 N. Lamar Blvd Austin, TX 78705	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description (If travel outside of Texas, complete Schedule T) postage
OF EXPENDITURE		
9 Complete ONLY if	Candidate / Officeholder name	Check if Austin, TX, officeholder living expanse Office sought: Office held:
direct expenditure to benefit C/OH	Cutalitation Companies Training	Onico cougni.
Date	Payee name	
12/08/2014	Postmaster	
Amount (\$)	Payee address City; State; Zip Code	
\$1,960.00	3507 N. Lamar Blvd Austin, TX 78705	
PURPOSE	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) postage
OF	Finding Expense	
EXPENDITURE		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
12/08/2014	Postmaster	
Amount (\$)	Payee address City; State; Zip Code	
\$44.10	3507 N. Lamar Blvd Austin, TX 78705	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Printing Expense	postage
EXPENDITURE		\ <u></u>
Complete ONLY if	Candidate / Officeholder name	Check If Austin, TX, officeholder living expense Office sought: Office held:
direct expenditure to benefit C/OH	Candidate / Officenoider frame	Office sought: Office held:
Date	Payee name	
12/08/2014	Postmaster	
Amount (\$)	Payee address City; State; Zip Code	
\$44.10	3507 N. Lamar Blvd Austin, TX 78705	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE ÓF	Printing Expense	postage
EXPENDITURE		<u></u>
Complete ONLY if	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
direct expenditure to benefit C/OH	Candidate / Officerolder frame	Office sought.

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense

EXPENDITURE CATEGORIES

salaries/Wages/Contract Labor
Solicitation/Fundralsing Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Fees	Printing Expense Office Overheads The Instruction Guide explains ho	/Rental Expense OTHER (enter a category not listed above) w to complete this form.
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 7/10 F	I ⁻ m ,	00000008
4 Date	5 Payee name	
12/08/2014	Postmaster	
6 Amount (\$)	7 Payee address City; State; Zip Code	A A A A A A A A A A A A A A A A A A A
\$44.10	3507 N. Lamar Blvd	
*	Austin, TX 78705	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T) postage
OF	Printing Expense	postago
EXPENDITURE		Check if Austin, TX, officeholder living expense
9 Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		
Date 12/08/2014	Payee name Postmaster	
12/08/2014 Amount (\$)	Payee address City; State; Zip Code	
\$44.10		
Φ44.10	Austin, TX 78705	•
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Printing Expense	postage
EXPENDITURE		<u></u>
Complete ONLY if	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
direct expenditure	Candidate / Onicendider name	Onice sought. Onice heid.
to benefit C/OH		
Date	Payee name	
12/08/2014	Postmaster	
Amount (\$)	Payee address City: State; Zip Code	
\$44.10	3507 N. Lamar Blvd Austin, TX 78705	
	, , , , , , , , , , , , , , , , , , , ,	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Printing Expense	postage
EXPENDITURE		
	Condidate / Office helder name	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		
Date	Payee name	
12/08/2014	Postmaster	
Amount (\$)	Payee address City; State; Zip Code	
\$44.10	3507 N. Lamar Blvd Austin, TX 78705	
	Addin, 12 10100	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Printing Expense	postage
OF EXPENDITURE		
1 /11 1 (10		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

EXPENDITURE CATEGORIES
ense Salaries/Wages/Contract Labor
Solicitation/Fundralsing Expense
Travel In District
Travel Out Of District

Fees	Printing Expense Office Overher The Instruction Guide explains h	ad/Rental Expense OTHER (enter a category not listed above)
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 8/10 F	Dealess Amondo	00000008
4 Date	5 Payee name	
12/09/2014	Postmaster	
6 Amount (\$)	7 Payee address City; State; Zip Code	· · · · · · · · · · · · · · · · · · ·
\$735.00	l'i_ '	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description (If travel outside of Texas, complete Schedule T) postage
OF EXPENDITURE		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	Payee name	
12/08/2014	Sargent, Sam	
Amount (\$)	Payee address City; State; Zip Code	
\$1,000.00	5516 Grover Ave. #103 Austin, TX 78756	
PURPOSE OF	Category (See Categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T) Consulting
EXPENDITURE		Charlett Aveste TV efficient alder living pypages
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
12/18/2014	Serna, Marilyn	
Amount (\$)	Payee address City; State; Zip Code	
\$1,416.00	10100 Ivanhoe Trail Austin, TX 78748	
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	Payee name	
12/18/2014	Steger, Mackenzie	
Amount (\$)	Payee address City; State; Zip Code	
\$414.00	350 North St. #1405A San Marcos, TX 78666	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel oulside of Texas, complete Schedule T) Check if Austin, TX, officeholder living expense
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		

POLITIC	CAL EXPENDITURES	SCHEDULE F
Advertising Expe	EXPENDITURE CATE ense Gifts/Awards/Memorial Expense Salaries/Wages	
Accounting/Bank Consulting Expe Event Expense Fees	nse Food/Beverage Expense Travel In Distric Polling Expense Travel Out Of D	draising Expense Transportation Equipment & Related Expense to the strict Candidate/Officeholder/Political Committee th/Rental Expense OTHER (enter a category not listed above)
1 PAGE# Schedule: 9/10 F	2 FILER NAME Dealey, Amanda	3 ACCOUNT # (TEC filers) 00000008
4 Date	5 Payee name	1 00000006
12/18/2014	Truong, Lauri	
6 Amount (\$) \$1,134.00	7 Payee address City; State; Zip Code 16713 Dorman Dr. Round Rock, TX 78681	
8 PURPOSE	(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) Contact labor
OF EXPENDITURE	Calanda, Wagos, Gonidadi Esper	
		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	Payee name	
12/15/2014 Amount (\$)	Tyson's Tacos Payee address City; State; Zip Code	
\$91.37	•	
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) [
OF EXPENDITURE	Food/Beverage Expense	
Complete ONLY if	Candidate / Officeholder name	Check If Austin, TX, officeholder living expense Office sought: Office held:
direct expenditure to benefit C/OH	Candidate / Oniceriolder name	Office sought: Office held:
Date	Payee name	
12/17/2014 Amount (\$)	Tyson's Tacos Payee address City; State; Zip Code	
\$51.32	4905 Airport Boulevard Austin, TX 78751	
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) food for event
OF EXPENDITURE	Food/Beverage Expense	·
EXPENDITURE		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
12/18/2014	Ukawoko, Amaka	
Amount (\$) \$1,632.00	Payee address City; State; Zip Code 1300 Crossing Place #2432 Austin, TX 78741	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Salaries/Wages/Contract Labor	contract labor
EXPENDITURE		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:

SCHEDULE F

	-	
Adver	tising Expens	e
Accou	inting/Bankin	g
Consu	ulting Expens	ē
	Expense	

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

EXPENDITURE CATEGORIES

ense Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District

Polling Expense Travel Out Of Printing Expense Office Overhe	District Candida ad/Rental Expense OTHER (er	is/Donations made by le/Officeholder/Political Committee later a category not listed above)
		3 ACCOUNT # (TEC filers)
Report: 27/27 Dealey, Amanda		00000008
5 Payee name Wallace, John		
7 Payee address City; State; Zip Code		
11316 Jollyville Rd. Austin, TX 78759		
(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outs contract labor	ide of Texas, complete Schedule T)
Candidate / Officeholder name	Office sought:	Office held:
Payee name		
1		
3217 North IH 35 Austin, TX 78722 Austin, TX 78722		
Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outs Printing	de of Texas, complete Schedule T)
Candidate / Officeholder name	Office sought:	Office held:
	Polling Expense Printing Expense Travel Out Of Office Overher The Instruction Guide explains 2 FILER NAME Dealey, Amanda 5 Payee name Wallace, John 7 Payee address City; State; Zip Code 11316 Jollyville Rd. Austin, TX 78759 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate / Officeholder name Payee name Worley Printing Co. Payee address City; State; Zip Code 3217 North IH 35 Austin, TX 78722 Austin, TX 78722 Category (See Categories listed at the top of this schedule)	Polling Expense Travel Out Of District Office Overhead/Rental Expense OTHER (en The Instruction Guide explains how to complete this form. 2

BUNDLING REPORT

Name of candidate/officeholder: Mandy Dealey

1. For each person/bundler who has solicited and obtained campaign contributions on your behalf of \$200 or more per person from five (5) or more individuals during the reporting period, provide the following information. (This requirement does not apply to an individual who raises funds in total amount of \$5,000 or less for a candidate through a fundraising event held at the individual's residence.)

Name of	Address	Occupation	Employer	Total Amount
Individual/Bundler				Bundled
Slater Swartwood	12604 Rush Creek Ln Austin, TX 78732	Marketing	Force Multiplier	\$2,100
Nikelle Meade	5363 Austral Loop Austin, TX 78739	Partner	Husch Blackwell LLP	\$1,500
Jerry Harris	111 Congress Ave Suite 1400 Austin, TX 78701	Partner	Husch Blackwell LLP	\$1,775

2. For each person identified above, enter the name and address of each individual contributor whose contribution was bundled by that individual. Attach additional sheets if necessary.

Name of	Address	Occupation	Employer	Contribution	Bundler
Contributor				Amount	
Slater Swartwood	12604 Rush Creek Ln Austin, TX 78732	Marketing	Force Multiplier Solutions, Inc.	\$350	Slater Swartwood
Alison Swartwood	12604 Rush Creek Ln . Austin, TX 78732	Homemaker	N/A	\$350	Slater Swartwood
Robert Leondard	7122 Royal Ln Dallas, TX 75230	Chairman	Force Multiplier Solutions, Inc.	\$350	Slater Swartwood
Linda Leondard	7122 Royal Ln Dallas, TX 75230	Homemaker	N/A	\$350	Slater Swartwood
Chris Kerr	4115 Abingdon Dr Garland, TX 75043	EVP	Force Multiplier Solutions, Inc.	\$350	Slater Swartwood
Heather Kerr	4115 Abingdon Dr Garland, TX 75043	Homemaker	N/A	\$350	Slater Swartwood
Jason Oliver	3267 Bee Cave Rd #107 & #92 Austin, TX 78746	Land Manager	V&S Enterprises	\$300	Nikelle Meade
Stacy Oliver	3267 Bee Cave Rd #107 & #92 Austin, TX 78746	Owner	V&S Enterprises	\$300	Nikelle Meade
Vicki Oliver	3267 Bee Cave Rd #107 & #92 Austin, TX 78746	Owner	V&S Enterprises	\$300	Nikelle Meade

Kerianne Oliver	1200 Verdant Way Austin, TX 78746	Homemaker	. N/A	\$300	Nikelle Meade
Guy Oliver	1200 Verdant Way Austin, TX 78746	General Manager	V&S Enterprises	\$300	Nikelle Meade
Brandon Curtis	14402 Sir Barton St San Antonio, TX 78248	HVAC Repair	Self Employed	\$350	Jerry Harris
Stephanie Curtis	14402 Sir Barton St San Antonio, TX 78248	Teacher	NEISD	\$350	Jerry Harris
Dohn Larson	1009 Ellingson Ln Austin, TX 78751	Attorney	Texas Classroom Teacher's Association	\$350	Jerry Harris
Husch Blackwell State PAC				\$350	Jerry Harris
Husch Blackwell, LLP				\$350	Jerry Harris
Alexandra Jashinsky	5001 Bent Creek Ct El Dorado Hills, CA 95762	Associate	Husch Blackwell LLP	\$25	Jerry Harris

Office of the City Clerk, 20.36

Revised by the Ethics Review Commission 03/26/2014

Page 1 of 2

SCHEDULE ATX. 5 - attach to form C/OH (C & E	3)
Reference § 2-2-22, Austin City Code	

3.	Identify each person registered or required to be register under City Code, Chapter 4-8 (Regulation of Lobbyists) employed by, or compensated to lobby by: (1) any Bundler identified in Section 1 above, (2)
	business association through which the Bundler does business, or (3) the Bundler's employer.

Note: It is important to remember that contributions to you are from the <u>actual donor</u>, <u>not</u> from the individual who solicited the donations on your behalf. Therefore, on form C/OH you must identify the actual donor as the contributor.

STATE OF TEXAS VERIFICATION

I certify that the total amount bundled on my behalf in the campaign period by all partners, shareholders, principals, employees, and persons who conduct business through a business association that is subject to City Code, Section 2-2-22(E), when added together, does not exceed ten (10) times the contribution limit set by City Charter, Article III, Section 8(A)(1) for the entire business association.

Signature of Affiant

Office of the City Clerk, 20.36

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, off	ficeholder or campaign committee: <u>Am</u>	anda Dealey
- ·	vings or other financial institution according indicated. For each additional institution	ount maintained during 2014, enter the on, use a copy of this schedule.
The name of the finance	cial institution: Frost Bank	
Type of account: Chec	eking	
The beginning balance	:_\$0	Particular Control of the Control of
The ending balance: _\$	4,415.40	
Enter the following inf	ormation for checks issued on that acco	ount that have not cleared by December 31:
Date	Payee	Amount
12-29-214	Anne Clary	\$2000
12-16-14	Littlefield Consulting	\$1400
12-18-14	Lucy Cooper	\$1162
12-18-14	John Wallace	\$1452
11-14-14	John Wallace	\$282
9-30-14	Andrew Hardwick	\$86.63
10-16-14	Andrew Hardwick	. \$360
the contributor's financ	ial institution:	ributions and deposited but dishonored by
Date of receipt	Contributor	Amount

Revised by the Ethics Review Commission 03/26/2014

Page 1 of 2

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 dates	\$1.09 bank interest	
5-6-14	.32 Gvalidate test deposit for bank service	
		And the state of t

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

Date of receipt	Contributor	Amount
12/7/14	Alfred Stanley	\$100
12/7/14	William Apt	\$100

2014

Apparently, former **Council Member Chris** Riley did NOT file ANY of the campaign report forms for the second half of 2013 which were to be filed with the City Clerk by January 15, 2014. No report from Riley is shown on the City's webpage for January 15, 2014.

2014 ENHIVE REPORT

Texas Ethics Commission

P.O. Box 12070

Austin, Texas 78711-2070

(512) 463-5800

(TDD 1-800-735-2989)

	E / OFFICEHO N FINANCE RE				FO COVER S	RM C/O HEET PG	
The C/OH Instruction (Guide explains how to comple	ete this form.	1 ACCOUNT # (Ethics Commission	Filers)	2 Total pages fi	ed: U	7:
3 CANDIDATE / OFFICEHOLDER	MS/MRS/MR FIRE		MI		and the same of the same	EUSE ONLY	1
NAME	NICKNAME LAS		su	FFIX	Data Received	014	Š
	LEFFI	NGWE	LL			E E	굞
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of address	ADDRESS IPOBOX: APTISUITED 4516 Balcu Plustin, TX	ones Dr	rue	COOE	Date Hand-delivered	3	CEIVED
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUM (5/2) 422-	/BER	EXTENSION/		Receipt*# Date Processed	Amount	
6 CAMPAIGN TREASURER NAME	MS/MRS/MR FIR. NICKNAME LAS	ST	sı. Mi		Date imaged		
	LEFF	INGWE	ELL				1
7 CAMPAIGN TREASURER ADDRESS (residence or business)	4516 B Austin,	E); APT/SÚITE#;	ecora	ATE.	5	# . 2	**************************************
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE	Jil	ling 2	5			
9, REPORT TYPE	January 15 3 3 3 80	2-	2-1	+2	r ap	er campaign pointment (y) Attach C/OH - FR)	
10 PERIOD COVERED	Month Day Year 7/1/2013	00	t any 20int				e in
11 ELECTION	ELECTION DATE Month Day Year	Primary 1	- Runoff		Senarai	Special	1 3
12 OFFICE	OFFICE HELD (if any)	1 31 1	13 OFFICE SOUG	HT (ifknown)			
	MAYOR	e VI					
		GO TO PA	GE2	- 15 A		a s	

2014 BAHIVE REPORT

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 complet	te this form.	1 ACCOUNT (Ethics Commiss 00999	ion Filers)	2 Total pages filed:	3 W.	
3 CANDIDATE /	MS/MRS/MR FIRS	т		MI /	OFFICE	SE ONLY	
OFFICEHOLDER NAME	LE	E.	× ·		Date Received	<u> </u>	-
NAME	NICKNAME LAST			SUFFIX	3	量	A
		. - د د جرد .				SE -	<u>ي</u>
	LEFFI	VOWEL				REC	N
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT / SUITE #;	CITY:		ZIP COOE		- T- CE	2
MAILING	4516 Balco	nes Dri	ve /		Date Hand-delivered or F	ostmarked, K	_
ADDRESS	Austin TX	70721					Ç
change of address	TIMSCON IN	1,6 737			Receipt*#	Amount	Ē
5 CANDIDATE/	AREA CODE PHONE NUME		EXTENSION	٠.	Date Processed	၊ မ 	ź
OFFICEHOLDER PHONE	(52) 422-6	6150	•			φ	
6 CAMPAIGN	MS/MRS/MR FIRS	<u>.</u> т		MI	Date Imaged	•	
TREASURER '	Le	E	•	*			
NAME	NICKNAME LAST			SUFFIX			,
	LEFF	INGWE	44				
7 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE)	: APT/SUITE#:	CITY;	STATE;	ZIP CODE		
TREASURER			•				٠
ADDRESS (residence or business)	4516 Bak	ones or	ive.	•		•	
	Austin, TR	78731	!		-		
8 CAMPAIGN	AREA CODE PHONE NUME	BER	EXTENSION	. ,			<u> </u>
TREASURER					·		
PHONE	(51Z) 422-	6/50			•		
:	*.		-	•	. ,	1	
9. REPORT TYPE	January 15 30th d	lay before election	Runoff		15th day after c		
		-	— .	- *.	treasurer appoin (officeholder only)	ment	
	July 15 8th da	y before election	Exceeded limit	\$500	Final report (Attac	a C/OH - FR)	
:					· :		
10 PERIOD	Month Day Year	-	Month	Day .	Year	, , , , , , , , , , , , , , , , , , ,	
COVERED	7/1/2013	THROUGH	12	/31/	2013		
11 ELECTION	ELECTION DATE	ELECTION TYPE ·					
, ELLO MON	Month Day Year	Primary 1	Runoff		General [Special	
		•		I			
					*		
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOL	JGHT (ilknown)		•	
1 :	Mayon						
	MAYOR				<i>:</i>		
		GO TO PAG	E2		. 3		
	,				·		

CANDIDATE/OFFICEHOLDER REPORT: SUPPORT & TOTALS

P.O. Box 12070

FORM C/OH COVER SHEET PG 2

14 C/OH NAME			15 ACCOUNT # (Ethics Commission Filers)	
LEE LE	EFFING	WELL	00999999	
16 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.			
	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL SPECIFIC	COMMITTEE ADDRESS		
additional pages		COMMITTEE CAMPAIGN TREASURER NAME		
additional pages				
		COMMITTEE CAMPAIGN TREASURER ADDRESS		
	,			
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THES. LOANS, OR GUARANTEES OF LOANS), UNLESS ITEM		
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ -0-	
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$ - 0 -			
	4. TOTAL	\$ -0-		
CONTRIBUTION BALANCE	5. TOTAL P	DAY \$ 233.67		
OUTSTANDING LOAN TOTALS	6. TOTAL P	* 90,910.93		
18 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. STACEY KRUSE My Commission Expires June 03, 2017 Signature of Candidate or Officer older				
AFFIX NOTARY STAM	scribed before		\mathcal{W} this the	
— 14 day of MUANY 20 14 to certify which, witness my hand and seal of office. HAMIX NALL STATES KYUSE MOTAUX				
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath				

EXEMPTION STATEMENT

(To be used only when no electronic filing of a Campaign Finance Report (C&E) will be done)

•		E OR COMM	•	-	
LEFFIN	IGNELL		E		
				•	
ADDRESS:	4514	Baleon	ies Driv	ie, Au	stin, TR 7
			<i>:</i>	. ` '	
DATE OF F	ILING:			•	
		•			
	•	ST	ATEMENT		
will not be fi	tend to raise 1, 20 ling our electors raised ex	more than \$30 13 through 4 tion contribution acceed \$30,000	December . December . on and expendit	utions for the 3 7':, 20 1.3 ture reports (tee), have not raise campaign period Therefore, I/v C&E) electronical Campaign Finan
•					
Signed by Ca	Leff yu ndidate or C	M ampaign Comr	nittee		
Date //	3/14	• •			
		s that if contribust be filed ele		\$30,000, subs	equent Campaign