

**CANDIDATE / OFFICEHOLDER  
CAMPAIGN FINANCE REPORT**

**FORM C/OH  
COVER SHEET PG 1**

<b>The C/OH Instruction Guide explains how to complete this form.</b>		<b>1 Filer ID</b>	<b>2 Total pages filed:</b> 24
<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	MS / MRS / MR	FIRST Delia	MI
	NICKNAME	LAST Garza	SUFFIX
<b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b> <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE		<b>OFFICE USE ONLY</b>
	Post Office Box 111  Austin, TX 78767		Date Received
			Date Hand-delivered or Date Postmarked
			Receipt #
			Amount
			Date Processed
			Date Imaged
<b>5 CAMPAIGN TREASURER NAME</b>	MS / MRS / MR	FIRST Martha	MI
	NICKNAME	LAST Cotera	SUFFIX
<b>6 CAMPAIGN TREASURER ADDRESS</b> <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE		
	1502 Norris Dr. Austin, TX 78704		
<b>7 CAMPAIGN TREASURER PHONE</b>	AREA CODE	PHONE NUMBER	EXTENSION
	(512)	444-7595	
<b>8 REPORT TYPE</b>	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)		
	<input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
<b>9 PERIOD COVERED</b>	Month Day Year		Month Day Year
	09/30/2016		THROUGH 10/29/2016
<b>10 ELECTION</b>	ELECTION DATE		ELECTION TYPE
	Month Day Year 11/08/2016		<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special
<b>11 OFFICE</b>	OFFICE HELD (if any)		<b>12 OFFICE SOUGHT (if known)</b>
	Austin City Council District 2		
<b>GO TO PAGE 2</b>			

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 AUSTIN CITY CLERK RECEIVED

**CANDIDATE / OFFICEHOLDER REPORT:  
SUPPORT & TOTALS**

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

2 of 24

<b>13 C / OH NAME</b> Garza, Delia	<b>14 Filer ID</b>
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**15 NOTICE FROM POLITICAL COMMITTEE(S)**  
 Additional Pages

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.

<input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	<b>COMMITTEE TYPE</b> <b>COMMITTEE NAME</b> <hr/> <b>COMMITTEE ADDRESS</b> <hr/> <b>COMMITTEE CAMPAIGN TREASURER NAME</b> <hr/> <b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b> <hr/>
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<b>16 CONTRIBUTION TOTALS</b>	1.	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	35.00
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	12,309.00
<b>EXPENDITURE TOTALS</b>	3.	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	554.57
	4.	TOTAL POLITICAL EXPENDITURES	\$	16,597.71
<b>CONTRIBUTION BALANCE</b>	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	21,709.06
<b>OUTSTANDING LOAN TOTALS</b>	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	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.

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Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Delia Garza, this the 31<sup>st</sup> day of October, 2016, to certify which, witness my hand and seal of office.

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Signature of officer administering

Susan Harry

---

Printed name of officer administering

Notary

---

Title of officer administering oath

**SUBTOTALS - C/OH**

<b>18 FILER NAME</b> Garza, Delia		<b>19 Filer ID</b>
<b>20 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 11,970.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 339.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 16,597.71
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/11 Rpt: 4/24
<b>2</b> FILER NAME Garza, Delia		<b>3</b> Filer ID
<b>4</b> Date 10/17/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ammons, Nicholes  <b>6</b> Contributor address; City; State; Zip Code 403 N Pleasant Valley Rd  Austin, TX 78702-4838	<b>7</b> Amount of Contribution (\$)  \$350.00
<b>8</b> Principal occupation / Job title (See Instructions) Partner		<b>9</b> Employer (See Instructions) Trubox Products
Date 10/11/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin Board of Realtors PAC  Contributor address; City; State; Zip Code 4106 Medical Pkwy  Austin, TX 78756-3722	Amount of Contribution (\$)  \$350.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/18/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Black Swan Yoga  Contributor address; City; State; Zip Code 4401 Freidrich Ln Ste 302 Austin, TX 78744-1852	Amount of Contribution (\$)  \$350.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/22/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blizzard, Mike  Contributor address; City; State; Zip Code 2100 Southern Oaks  Austin, TX 78745	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/30/2016	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C30001556</u> ) CWA COPE-PCC  Contributor address; City; State; Zip Code 501 3rd St NW  Washington, DC 20001-2797	Amount of Contribution (\$)  \$350.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/11 Rpt: 5/24
<b>2</b> FILER NAME Garza, Delia		<b>3</b> Filer ID
<b>4</b> Date 10/22/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carrasco, Lizette  <b>6</b> Contributor address; City; State; Zip Code 1112 West 9th  Austin, TX 78703	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
<b>Date</b> 10/09/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Cavazos, Perla  <b>Contributor address; City; State; Zip Code</b> 1108 Fiesta St  Austin, TX 78702-3011	<b>Amount of Contribution (\$)</b>  \$50.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 10/28/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Griffin  <b>Contributor address; City; State; Zip Code</b> 2604 Stratford Drive  Austin, TX 78746	<b>Amount of Contribution (\$)</b>  \$350.00
<b>Principal occupation / Job title (See Instructions)</b> Public relations		<b>Employer (See Instructions)</b> Self
<b>Date</b> 10/28/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) DeFrates, Ana  <b>Contributor address; City; State; Zip Code</b> 2011 Garden St  Austin, TX 78702	<b>Amount of Contribution (\$)</b>  \$100.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 10/25/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Drenner, Steve  <b>Contributor address; City; State; Zip Code</b> 3209 Crosswind Dr  Spicewood, TX 78669-5130	<b>Amount of Contribution (\$)</b>  \$25.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/11 Rpt: 6/24
<b>2</b> FILER NAME Garza, Delia		<b>3</b> Filer ID
<b>4</b> Date 10/04/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunkerley, Betty	<b>7</b> Amount of Contribution (\$) <span style="float:right">\$25.00</span>
<b>6</b> Contributor address; City; State; Zip Code 299 Makaha Dr  Bastrop, TX 78602		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/27/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felker Jones, Laurie	Amount of Contribution (\$) <span style="float:right">\$40.00</span>
Contributor address; City; State; Zip Code 6213 Pennwood Lane  Austin, TX 78745		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/28/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Rudy	Amount of Contribution (\$) <span style="float:right">\$250.00</span>
Contributor address; City; State; Zip Code 22516 Crazy Cove  Spicewood, TX 78669		
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Garza EMC
Date 10/18/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Havey, Jason	Amount of Contribution (\$) <span style="float:right">\$350.00</span>
Contributor address; City; State; Zip Code 3715 S 1st St Apt 234 Austin, TX 78704-0102		
Principal occupation / Job title (See Instructions) COO		Employer (See Instructions) Onnit Labs
Date 10/20/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heimsath, Ben	Amount of Contribution (\$) <span style="float:right">\$50.00</span>
Contributor address; City; State; Zip Code 2104 Greenwood Ave  Austin, TX 78723		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/11 Rpt: 7/24
<b>2</b> FILER NAME Garza, Delia		<b>3</b> Filer ID
<b>4</b> Date 10/18/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herman, Rebecha	<b>7</b> Amount of Contribution (\$)  \$350.00
<b>6</b> Contributor address; City; State; Zip Code 403 N Pleasant Valley Rd  Austin, TX 78702-4838		
<b>8</b> Principal occupation / Job title (See Instructions) Office Manager		<b>9</b> Employer (See Instructions) Onnit Labs
Date 09/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herrera, Tom	Amount of Contribution (\$)  \$30.00
Contributor address; City; State; Zip Code 2400 Mozelle Ln  Austin, TX 78744-8033		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/18/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) House, Caitlin	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 171 Wolf Berry Path  Buda, TX 78610-2000		
Principal occupation / Job title (See Instructions) Executive assistant		Employer (See Instructions) Onnit Labs
Date 10/13/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, John	Amount of Contribution (\$)  \$200.00
Contributor address; City; State; Zip Code 8537 Adirondack Trail  Austin, TX 78759		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Dell Inc.
Date 10/11/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Melissa	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 1203 A Elm Street  Austin, TX 78703		
Principal occupation / Job title (See Instructions) Community volunteer		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/11 Rpt: 8/24
<b>2</b> FILER NAME Garza, Delia		<b>3</b> Filer ID
<b>4</b> Date 10/09/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Michael  <b>6</b> Contributor address; City; State; Zip Code 2045 Zach Scott Street  Austin, TX 78723	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) State of Texas
Date 10/18/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landeros, Daniel  Contributor address; City; State; Zip Code 8007 Cheno Cortina Trl  Austin, TX 78749-2721	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/18/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lowe, Chase  Contributor address; City; State; Zip Code 171 Wolf Berry Path  Buda, TX 78610-2000	Amount of Contribution (\$)  \$350.00
Principal occupation / Job title (See Instructions) Manager- Business Development		Employer (See Instructions) Texas State Sports Properties
Date 10/18/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marcus, Aubrey  Contributor address; City; State; Zip Code 4401 Freidrich Ln Ste 302 Austin, TX 78744-1852	Amount of Contribution (\$)  \$350.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Onnit
Date 10/09/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCann, Jana  Contributor address; City; State; Zip Code 4000 Pinckney St  Austin, TX 78723-5397	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/11 Rpt: 9/24
<b>2</b> FILER NAME Garza, Delia		<b>3</b> Filer ID
<b>4</b> Date 10/07/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McIver, Diana	<b>7</b> Amount of Contribution (\$) \$250.00
<b>6</b> Contributor address; City; State; Zip Code 1433 Circle Ridge Dr C-100 Austin, TX 78746-3403		
<b>8</b> Principal occupation / Job title (See Instructions) President		<b>9</b> Employer (See Instructions) DMA Companies
Date 10/04/2016	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00342907) Midwest Region Laborers' Political League	Amount of Contribution (\$) \$350.00
Contributor address; City; State; Zip Code 1 N Old State Capitol Plz Ste 525 Springfield, IL 62701-1375		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/23/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moffat, Susan	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 4112 Speedway  Austin, TX 78751		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/09/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mueller, Elizabeth	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 3213 French Place  Austin, TX 78722		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/09/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Niland, Nona (Dr.)	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 3939 Bee Cave Rd Bldg Austin, TX 78746		
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Niland Foundation

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/11 Rpt: 10/24
<b>2</b> FILER NAME Garza, Delia		<b>3</b> Filer ID
<b>4</b> Date 10/18/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Onnit Academy, LLC	<b>7</b> Amount of Contribution (\$)  \$350.00
<b>6</b> Contributor address; City; State; Zip Code 4401 Freidrich Ln Ste 301 Austin, TX 78744-1852		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/18/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Onnit Labs, LLC	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 4401 Freidrich Ln Ste 302 Austin, TX 78744-1852		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/18/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orr, Jessica	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 2702 Goldbridge Dr  Austin, TX 78745-6860		
Principal occupation / Job title (See Instructions) Assistant		Employer (See Instructions) Medical Equation
Date 10/18/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orr, Rhett	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 2702 Goldbridge Dr  Austin, TX 78745-6860		
Principal occupation / Job title (See Instructions) Director of Accounting		Employer (See Instructions) Onnit Labs
Date 10/03/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pena, Andres	Amount of Contribution (\$)  \$300.00
Contributor address; City; State; Zip Code 306 Pearl Parkway  San Antonio, TX 78215		
Principal occupation / Job title (See Instructions) Government Relations		Employer (See Instructions) Kaufman & Killen, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/11 Rpt: 11/24
<b>2</b> FILER NAME Garza, Delia		<b>3</b> Filer ID
<b>4</b> Date 10/05/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roa, Ruby	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>6</b> Contributor address; City; State; Zip Code 611 Terrell Hill Dr  Austin, TX 78704	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/03/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Jennifer	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code 816 Congress Ave Ste 940 Austin, TX 78701	
Principal occupation / Job title (See Instructions) Government Relations		Employer (See Instructions) McGuire Woods Consulting
Date 10/03/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Marc	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code 1122 Colorado Suite 2399 Austin, TX 78701	
Principal occupation / Job title (See Instructions) Government Relations		Employer (See Instructions) Offices of Marc A. Rodriguez
Date 10/24/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez-Mendoza, Amalia	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 2710 Addison Ave  Austin, TX 78757-2317	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/18/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roll Onnit, LLC	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code 4401 Freidrich Ln Ste 301 Austin, TX 78744-1852	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/11 Rpt: 12/24
<b>2</b> FILER NAME Garza, Delia		<b>3</b> Filer ID
<b>4</b> Date 10/01/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) San Antonio Professional Firefighters PAC <hr/> <b>6</b> Contributor address; City; State; Zip Code PO Box 100455  San Antonio, TX 78201-1755	<b>7</b> Amount of Contribution (\$) <span style="float:right">\$350.00</span>
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/01/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Bradley <hr/> Contributor address; City; State; Zip Code 299 S Main St Ste 1300 Salt Lake City, UT 84111-2241	Amount of Contribution (\$) <span style="float:right">\$350.00</span>
Principal occupation / Job title (See Instructions) requested		Employer (See Instructions) requested
Date 10/09/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seely, Nina <hr/> Contributor address; City; State; Zip Code 8312 Plum Ridge Dr  Austin, TX 78735	Amount of Contribution (\$) <span style="float:right">\$50.00</span>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/09/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sifuentes, Marina <hr/> Contributor address; City; State; Zip Code 2510 Camino Alto  Austin, TX 78746-2408	Amount of Contribution (\$) <span style="float:right">\$350.00</span>
Principal occupation / Job title (See Instructions) Realtor/Broker		Employer (See Instructions) MPM Properties
Date 10/18/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silva, Rocky <hr/> Contributor address; City; State; Zip Code 6519 Pevensey Dr  Austin, TX 78745-3955	Amount of Contribution (\$) <span style="float:right">\$350.00</span>
Principal occupation / Job title (See Instructions) Director of Warehouse Operations		Employer (See Instructions) Onnit Labs

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 10/11 Rpt: 13/24
2 FILER NAME Garza, Delia		3 Filer ID
4 Date 10/22/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valls-Trelles, Patricia	7 Amount of Contribution (\$)  \$25.00
6 Contributor address; City; State; Zip Code 2706 Sherwood Ln  Austin, TX 78704-6438		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/01/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Von Dohlen, Chris	Amount of Contribution (\$)  \$200.00
Contributor address; City; State; Zip Code 1406 Kent Ln  Austin, TX 78703-3819		
Principal occupation / Job title (See Instructions) Entrepreneur & Investor		Employer (See Instructions) The Von Dohlen Group
Date 10/01/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Von Dohlen, Teresa	Amount of Contribution (\$)  \$150.00
Contributor address; City; State; Zip Code 1406 Kent Ln  Austin, TX 78703-3819		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/09/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whatley, John	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 2909 W 35th St  Austin, TX 78703-1105		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 10/22/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitesides, Cindy	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code 8109 Valverde  Austin, TX 78739		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/11 Rpt: 14/24
<b>2</b> FILER NAME Garza, Delia		<b>3</b> Filer ID
<b>4</b> Date 10/16/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolf, John	<b>7</b> Amount of Contribution (\$)  \$350.00
<b>6</b> Contributor address; City; State; Zip Code 9500 Zuniga Dr  Austin, TX 78749-1163		
<b>8</b> Principal occupation / Job title (See Instructions) Director of Fitness Education		<b>9</b> Employer (See Instructions) Onnit Academy
Date 10/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolf, Stephanie	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 9500 Zuniga Dr  Austin, TX 78749-1163		
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) None
Date 10/09/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young Brown, Patricia	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code 6204 Diamond Head Circle  Austin, TX 78746		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A2: Sch: 1/1 Rpt: 15/24	
2 FILER NAME Garza, Delia		3 Filer ID	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 35.00	
5 Date 10/24/2016	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) South Austin Democrats PAC	8 Amount of contribution (\$) \$304.00	9 In-kind contribution description printing & mailing postcards
7 Contributor address; City; State; Zip Code PO Box 152592  Austin, TX 78715-2592		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

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

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/9 Rpt: 16/24	<b>2</b> FILER NAME Garza, Delia	<b>3</b> Filer ID
<b>4</b> Date 10/19/2016	<b>5</b> Payee name Azul Strategies	
<b>6</b> Amount (\$) \$5,982.59	<b>7</b> Payee address; City; State; Zip Code 1802 Ann Arbor  Austin, TX 78704	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing & design services
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/29/2016	Payee name Bumper Active Austin	
Amount (\$) \$776.00	Payee address; City; State; Zip Code 5925 Burnet Rd.  Austin, TX 78756	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense t-shirts
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/30/2016	Payee name Contreras, Victoria	
Amount (\$) \$465.00	Payee address; City; State; Zip Code 1975 Aquarena Springs Dr. #334C  San Marcos, TX 78666	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

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

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/9 Rpt: 17/24	<b>2</b> FILER NAME Garza, Delia	<b>3</b> Filer ID
<b>4</b> Date 10/14/2016	<b>5</b> Payee name Contreras, Victoria	
<b>6</b> Amount (\$) \$540.00	<b>7</b> Payee address; City; State; Zip Code 1975 Aquarena Springs Dr. #334C  San Marcos, TX 78666	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought      Office held
Date 10/29/2016	Payee name DonateWay	
Amount (\$) \$155.22	Payee address; City; State; Zip Code P.O. Box 301267  Austin, TX 78703	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense merchant account processing fees
Complete ONLY if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought      Office held
Date 10/24/2016	Payee name East Side Pies	
Amount (\$) \$109.32	Payee address; City; State; Zip Code 1401 Rosewood  Austin, TX 78702	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense volunteer meeting
Complete ONLY if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

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

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 3/9 Rpt: 18/24	<b>2</b> FILER NAME Garza, Delia	<b>3</b> Filer ID
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<b>4</b> Date 10/14/2016	<b>5</b> Payee name Elleh, Mojana
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<b>6</b> Amount (\$) \$300.00	<b>7</b> Payee address; City; State; Zip Code 7330 Bluff Springs Dr. #4301  Austin, TX 78744
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/30/2016	Payee name Elleh, Mojana
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Amount (\$) \$450.00	Payee address; City; State; Zip Code 7330 Bluff Springs Dr. #4301  Austin, TX 78744
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/14/2016	Payee name Harry, Susan
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Amount (\$) \$650.00	Payee address; City; State; Zip Code P.O. Box 301074  Austin, TX 78703
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Compliance consulting
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

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

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 4/9 Rpt: 19/24	<b>2</b> FILER NAME Garza, Delia	<b>3</b> Filer ID
<b>4</b> Date 10/14/2016	<b>5</b> Payee name January, Sonja	
<b>6</b> Amount (\$) \$300.00	<b>7</b> Payee address; City; State; Zip Code 1124 Rutland Dr. #150  Austin, TX 78758	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/30/2016	Candidate/Officeholder name January, Sonja	
Amount (\$) \$420.00	Office sought 1124 Rutland Dr. #150  Austin, TX 78758	
Office held		
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/14/2016	Candidate/Officeholder name Johnson, Marquitus	
Amount (\$) \$300.00	Office sought 300 Ferguson Drr. #6406  Austin, TX 78753	
Office held		
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

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

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 5/9 Rpt: 20/24		<b>2</b> FILER NAME Garza, Delia		<b>3</b> Filer ID
<b>4</b> Date 09/30/2016		<b>5</b> Payee name Johnson, Marquitus		
<b>6</b> Amount (\$) \$480.00		<b>7</b> Payee address; City; State; Zip Code 300 Ferguson Drr. #6406  Austin, TX 78753		
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held
Date 10/14/2016		Payee name Lascina, Julianne		
Amount (\$) \$180.00		Payee address; City; State; Zip Code 1109 South Pleasant Valley Rd. #836  Austin, TX 78741		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held
Date 09/30/2016		Payee name Lascina, Julianne		
Amount (\$) \$270.00		Payee address; City; State; Zip Code 1109 South Pleasant Valley Rd. #836  Austin, TX 78741		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

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

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 6/9 Rpt: 21/24	<b>2</b> FILER NAME Garza, Delia	<b>3</b> Filer ID
<b>4</b> Date 10/08/2016	<b>5</b> Payee name Lowe's	
<b>6</b> Amount (\$) \$39.55	<b>7</b> Payee address; City; State; Zip Code 5510 S. IH 35  Austin, TX 78745	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense yard sign supplies
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 10/23/2016	Payee name Lowe's	
Amount (\$) \$97.31	Payee address; City; State; Zip Code 5510 S. IH 35  Austin, TX 78745	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense yard sign supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 10/14/2016	Payee name Marshall, Alden	
Amount (\$) \$135.00	Payee address; City; State; Zip Code 303 East 21 St. #B324  Austin, TX 78705	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

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

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 7/9 Rpt: 22/24	<b>2</b> FILER NAME Garza, Delia	<b>3</b> Filer ID
<b>4</b> Date 09/30/2016	<b>5</b> Payee name Ramos, Jennifer	
<b>6</b> Amount (\$) \$1,250.00	<b>7</b> Payee address; City; State; Zip Code 1730 E. Oltorf #401  Austin, TX 78741	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign manager salary
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 10/14/2016	Payee name Ramos, Jennifer	
Amount (\$) \$1,250.00	Payee address; City; State; Zip Code 1730 E. Oltorf #401  Austin, TX 78741	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign manager salary
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 10/14/2016	Payee name Robinson, Kelan	
Amount (\$) \$25.00	Payee address; City; State; Zip Code 1601 E. 10th Street  Austin, TX 78702	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense return contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

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

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 8/9 Rpt: 23/24	<b>2</b> FILER NAME Garza, Delia	<b>3</b> Filer ID
<b>4</b> Date 10/17/2016	<b>5</b> Payee name Serrano's	
<b>6</b> Amount (\$) \$253.15	<b>7</b> Payee address; City; State; Zip Code 9500 S. IH 35 Bldg. D  Austin, TX 78748	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense volunteer appreciation lunch
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 10/14/2016	Payee name Velasquez, Jose	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 2411 Willow  Austin, TX 78702	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 10/14/2016	Payee name Verbeke, Betty	
Amount (\$) \$240.00	Payee address; City; State; Zip Code 810 Philco Dr.  Austin, TX 78745	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

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

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 9/9 Rpt: 24/24	<b>2</b> FILER NAME Garza, Delia	<b>3</b> Filer ID
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<b>4</b> Date 09/30/2016	<b>5</b> Payee name Wise, Jordan
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<b>6</b> Amount (\$) \$465.00	<b>7</b> Payee address; City; State; Zip Code 1975 Aquarena Springs Dr. #334C  San Marcos, TX 78666
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/14/2016	Payee name Wise, Jordan
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Amount (\$) \$660.00	Payee address; City; State; Zip Code 1975 Aquarena Springs Dr. #334C  San Marcos, TX 78666
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# Candidate Bundling Report: Schedule ATX.5

Attach to C/OH Coversheet

List each individual bundler and the contributions bundled in Sections 1-4. For additional bundlers, click "Add Another Bundler Page" below.

<b>1</b>	<b>BUNDLER NAME</b>	Jason Havey
<b>2</b>	<b>BUNDLER ADDRESS</b>	3715 S 1st St #234 Austin, TX 78704
<b>3</b>	<b>AMOUNT BUNDLED</b>	\$4,550

**4 Itemize each contribution bundled by the bundler listed above**

Contributor Last Name	Contributor First Name	Contribution Amount (\$)	Contribution Date (yyyymmdd)	Appears on Schedule
Havey	Jason	350	10/18/2016	A1
Herman	Rebecha	350	10/18/16	A1
House	Caitlin	350	10/18/2016	A1
Aubrey	Marcus	350	10/18/2016	A1
Onnit Academy, LLC		350	10/18/2016	A1
Onni Labs, LLC		350	10/18/2016	A1
Orr	Rhett	350	10/18/2016	A1
Roll Onnit, LLC		350	10/18/2016	A1
Silva	Rocky	350	10/18/2016	A1
Wolf	John	350	10/18/2016	A1
Wolf	Stephanie	350	10/18/2016	A1
Lowe	Chase	350	10/18/2016	A1
Orr	Jessica	350	10/18/2016	A1

Add Another Bundler Page