

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 4
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Mrs. Laura A. NICKNAME LAST SUFFIX Pressley, Ph.D.		OFFICE USE ONLY Date Received OCC RECEIVED AT JAN 15 '19 PM2:39 Date Hand-delivered or Date Postmarked Receipt # Amount \$ Date Processed Date Imaged
	4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 10203 Woodglen Cove, Austin, TX 78753 <input type="checkbox"/> Change of Address		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION () 512-762-3825		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mr. Marcelo NICKNAME LAST SUFFIX Tafoya		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2908 Overdale Austin TX 78723		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION () 512-698-4124		
9 REPORT TYPE	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"><input type="checkbox"/> January 15</div> <div style="width: 50%;"><input type="checkbox"/> 30th day before election</div> <div style="width: 50%;"><input type="checkbox"/> Runoff</div> <div style="width: 50%;"><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</div> <div style="width: 50%;"><input checked="" type="checkbox"/> July 15</div> <div style="width: 50%;"><input type="checkbox"/> 8th day before election</div> <div style="width: 50%;"><input type="checkbox"/> Exceeded \$500 limit</div> <div style="width: 50%;"><input type="checkbox"/> Final Report (Attach C/OH - FR)</div> </div>		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year 7/1/18 12/31/18		
11 ELECTION	<div style="display: flex;"> <div style="flex: 1;"> ELECTION DATE Month Day Year 12/16/14 </div> <div style="flex: 2;"> ELECTION TYPE <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special </div> </div>		
12 OFFICE	OFFICE HELD (if any) N/A	13 OFFICE SOUGHT (if known) Austin City Council District 4	

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

14 C/OH NAME

Laura Pressley, Ph.D.

15 Filer ID (Ethics Commission Filers)

**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

☐ GENERAL

☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

**17 CONTRIBUTION
TOTALS**

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 0

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 0

**EXPENDITURE
TOTALS**

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$ 0

4. TOTAL POLITICAL EXPENDITURES

\$ 0

**CONTRIBUTION
BALANCE**

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

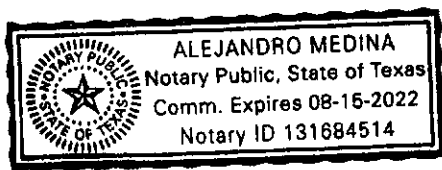
\$ 0

**OUTSTANDING
LOAN TOTALS**

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ \$22,000

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.

[Signature]

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Laura Pressley, this the 15th day of January, 20 19, to certify which, witness my hand and seal of office.

[Signature]
Signature of officer administering oath

Alejandro Medina
Printed name of officer administering oath

Notary
Title of officer administering oath

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3****19 FILER NAME**

Laura Pressley, Ph.D.

20 Filer ID (Ethics Commission Filers)**21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE****SUBTOTAL
AMOUNT**

1.	<input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$ \$22,000
5.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

LOANS**SCHEDULE E**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:

1

2 FILER NAME

Mrs. Laura Pressley, Ph.D.

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS

\$ 0

5 Date of loan
201405107 Name of lender ☐ out-of-state PAC (ID#: _____)
Mrs. Laura Pressley, Ph.D.9 Loan Amount (\$)
2,0006 Is lender
a financial
institution?
Y N ☒8 Lender address; City; State; Zip Code
10203 Woodglen Cove Austin Tx 7875310 Interest rate
011 Maturity date
N/A12 Principal occupation / Job title (See Instructions)
Owner13 Employer (See Instructions)
Pure Rain, LLC

14 Description of Collateral

☒ none15 Check if personal funds were deposited into political
account (See Instructions)
☒16 GUARANTOR
INFORMATION17 Name of guarantor
N/A

19 Amount Guaranteed (\$)

N/A

18 Guarantor address; City; State; Zip Code
N/A☒ not applicable20 Principal Occupation (See Instructions)
N/A21 Employer (See Instructions)
N/ADate of loan
20140902Name of lender ☐ out-of-state PAC (ID#: _____)
Mrs. Laura Pressley, Ph.D.Loan Amount (\$)
20,000Is lender
a financial
institution?
Y N ☒Lender address; City; State; Zip Code
10203 Woodglen Cove Austin TX 78753Interest rate
0Maturity date
N/APrincipal occupation / Job title (See Instructions)
OwnerEmployer (See Instructions)
Pure Rain, LLC

Description of Collateral

☒ noneCheck if personal funds were deposited into political
account (See Instructions)
☒GUARANTOR
INFORMATIONName of guarantor
N/A

Amount Guaranteed (\$)

N/A

Guarantor address; City; State; Zip Code
N/A☒ not applicablePrincipal Occupation (See Instructions)
N/AEmployer (See Instructions)
N**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.

BANK RECONCILIATION

A candidate, officeholder, or campaign committee filing a January 15 year-end contribution and expenditure report shall provide the following information for the previous calendar year.

Name of candidate, officeholder or campaign committee: Mrs. Laura Pressley, Ph. D.

For each checking, savings or other financial institution account maintained during 2018, enter the following information indicated. For each additional institution, use a copy of this schedule.

The name of the financial institution: Frost Bank

Type of account: checking

The beginning balance: \$ 0

The ending balance: \$ 0

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

Date	Payee	Amount
n/a		

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

Date of receipt	Contributor	Amount
n/a		

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

Amount of interest or dividends earned: 0

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

Date of deposit or withdrawal	Amount of deposit	Amount of withdrawal
n/a		

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
n/a		