CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

			1 Filer ID (E	thics Commission Filers)	2 Total pages file	ed:
The C/OH Instruction Guide explains how to complete this form.						
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST		MI	OFFICE	USE ONLY
NAME	NICKNAME	LAST	<i>1</i>	SUFFIX	Date Received	- 000 - 10 - 001
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address		APT / SUITE #;		T8Z0	07-15-15	5 P 02 : 10 RC\
5 CANDIDATE/ OFFICEHOLDER PHONE	(210)	955 - 85	<i>/</i>	TENSION	Date Hand-delivered	or Date Postmarked
6 CAMPAIGN TREASURER	MS / MRS / MR	FIRST	PLNEA	∕ MI	Receipt #	Amount \$
NAME	NICKNAME	B. UILL	, GALCH	SUFFIX	Date Processed	
				Watership Control	Date Imaged	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)		O BOX PLEASE); APT / S Sunsh	· · · · · · · · · · · · · · · · · · ·	anch	ZIP CODE	28
8 CAMPAIGN TREASURER PHONE	(0,0)	PHONE NUMBER		TENSION		
9 REPORT TYPE	January 15 July 15	30th day before e		Runoff Exceeded \$500 limit	15th day after treasurer ap (Officeholder	pointment
10 PERIOD COVERED	Month O	Day Year (5) 1 / 2015	THROUGH	Month Ole	Day Year 30 / 20	15
11 ELECTION	ELECTION DATE Month Day	Year Primary General	Runoff Special	Other Description	NA	
12 OFFICE	OFFICE HELD (if any)		13 OF	FICE SOUGHT (if known)		
ş	SAISO	Durt. 7	V X			9
GO TO PAGE 2						

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME	EO.	GARTA 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 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.			
	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL	*		
	SPECIFIC	COMMITTEE ADDRESS		
		COMMITTEE CAMPAIGN TREASURER NAME		
Additional Pages		Sommittee Sampaon Meroonen Name		
		COMMITTEE CAMPAIGN TREASURER ADDRESS		
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZE		
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ O	
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED			
	4. TOTAL POLITICAL EXPENDITURES \$ 2, 133.66			
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY \$ 1.70			
OUTSTANDING LOAN TOTALS		RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF TH Y OF THE REPORTING PERIOD	\$ 10,848.84	
18 AFFIDAVIT		I swear, or affirm, under penalty of per true and correct and includes all inform under Title 15, Election Code.		
		Signature of Candid	late or Officeholder	
AFFIX NOTARY STAME	P/SEALABOVE		4 1.	
Sworn to and subscr	ibed before me, b	y the said Ed Garza	, this the 15 1	
day of Gully	1	o certify which, witness my hand and seal of office.		
Common Variage Grent Carmon Varaur GMzalez Exec. Nicetos				
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath				

SUBTOTALS-COH

FORM C/OH COVER SHEET PG 3

20 Filer ID (Ethics Commission Filers) 21 SCHEDULE SUBTOTALS SUBTOTAL AMOUNT 1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 0 2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ 0 3. SCHEDULE B: PLEDGED CONTRIBUTIONS \$ 0 4. SCHEDULE E: LOANS (Reimhurs/mends) \$ 10,848,8 5. SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 489,77 6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ 0 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ 0					
NAME OF SCHEDULE 1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS 2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS 3. SCHEDULE B: PLEDGED CONTRIBUTIONS 4. SCHEDULE E: LOANS (Reimhurs in eight) 5. SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	19 FILER		20 Filer ID (Ethics Co	mmis	sion Filers)
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS 3. SCHEDULE B: PLEDGED CONTRIBUTIONS 4. SCHEDULE E: LOANS (Reimhurs/meints) 5. SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ () 6 () 7 () 8 () 9 ()					
3. SCHEDULE B: PLEDGED CONTRIBUTIONS \$ 0 4. SCHEDULE E: LOANS (Reimburgements) 5. SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 499.7 6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ 6 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ 0	1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	0
4. SCHEDULE E: LOANS (Reimburgements) 5. SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ 0	2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0
5. SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 499.77	3.			\$	O
5. SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 499.77	4.	schedule e: LOANS (Reimhurzements)		\$	10,848.84
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$	5.		IONS	\$	489.77
CONLEGEL TO, TOROTIAGE OF INVESTIGATION FOR THOMAT CONTINUES TIONS	6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0
8. 🗆	7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIB	UTIONS	\$	0
SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	8.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	1,643.89
9. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$	9.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINE	SS OF C/OH	\$	0
10. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS \$	10.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	ONTRIBUTIONS	\$	0
11. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER \$	11.		เพร	\$	0

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense **Event Expense** Fees Food/Beverage Expense Gift/Awards/Memorials Expense Consulting Expense Contributions/Donations Made By Polling Expense Printing Expense Travel In District Travel Out Of District Candidate/Officeholder/Political Committee Salaries/Wages/Contract Labor Other (enter a category not listed above) The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 1 Total pages Schedule F1: 2 FILER NAME 4 Date 5 Payee name 7 Payee address; Check if travel outside of Texas, complete Schedule T **PURPOSE** Check if Austin, TX, officeholder living expense OF Event Expense **EXPENDITURE** Candidate / Officeholder name Office held Office sought 9 Complete ONLY if direct expenditure to benefit C/OH SALSO Payee name Date Check if travel outside of Texas, complete Schedule T PURPOSE Office Overhea OF Check if Austin, TX, officeholder living expense EXPENDITURE Office held Office sought Complete ONLY if direct Candidate / Officeholder name expenditure to benefit C/OH Date Description Check if travel outside of Texas, complete Schedule T **PURPOSE** OF Check if Austin, TX, officeholder living expense EXPENDITURE Office held Candidate / Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH 6 ARCA ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/wards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarias/Nenes/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)

Candidate/Officeholder/Politic		ove)
	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule G:	2 FILER NAME 3 Filer ID (Ethics Commission	Filers)
4 Date	5 Payee name	
1-6-15	ATLT	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
128.63 Reimbursement from political contributions intended	Dallas, TX 75201	
8 PURPOSE	(a) Category (See categories listed at the top of this schedule)	
PURPOSE OF EXPENDITURE	Office Overleal Check if travel outside of Texas, complete Schedule T	
9 Complete ONLY if direct		
expenditure to benefit C/0	EO 64KA SA180	7
Date	Payee name	
1-7-15	Amevican Mini Storage Payee address; City; State; Zip Code	
Amount (\$)	Payee address; City; State; Zip Code	
Reimbursement from political contributions intended	3567 Frederickshung Rel. SAT 7820	01
PURPOSE	Category (See categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense	
Complete ONLY if direct		
expenditure to benefit C/C	BO GARJA SALSO"	7
Date	Payee name	
2-4-15	ATZT	
Amount (\$)	Payee address; City; State; Zip Code	
Reimbursement from political contributions intended	Pallas, Tx 75201	
PURPOSE	Category (See categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Office Over lead Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense	
Complete ONLY if direct	Candidate / Officeholder name Office sought Office held	
expenditure to benefit C/C		7
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED	

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense 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.					
1 Total pages Schedule G:	2 FILER NAME O GARTH	3 Filer ID (Ethics Commission Filers)			
4 Date 3 - 2 - 15	5 Payee name				
6 Amount (\$) 106.72 Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code Oally, Tx	T			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense			
9 Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name ED 6ADA	Office sought Office held ALCO 7			
7-4-15	Payee name AMTRICAN M	IN, STORAGE			
Amount (\$) Good Company		Kshy Rd SAT 78201			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	(b) Description Check if travel outside of Texas, complete Schedule T 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 SAIST			
Date 4-1-15	Payee name AT+T				
Amount (\$) 112.57 Reimbursement from political contributions intended	Payee address; City; State; Zip Code	Taul			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name OH CO CAR CAR CAR CAR CAR CAR CAR	Office sought Office held SASD7			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Event Expense Loan Repayment/Relmbursement Solicitation/Fundraising Expense Office Overhead/Rental Expense Polling Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Accounting/Banking Consulting Expense Transportation Equipment & Related Expense Travel In District Contributions/Donations Made By Printing Expense Travel Out Of District Salaries/Wages/Contract Labor Candidate/Officeholder/Political Committee Legal Services Other (enter a category not listed above) The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) Total pages Schedule G; 2 FILER NAME 4 Date 5 Payee name 6 Amount (\$ 7 Payee address; City; State; Zip Code Dalles, TX 75201 intended (b) Description (a) Category (See categories listed at the top of this schedule) 8 PURPOSE Check if travel outside of Texas, complete Schedule T OF Office Over Lead **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name AMERICAN MINI STORAGE Payee address; City; State; Zip Code 3567 Fredericks hy Rel 347 7820/ Reimbursement from political contributions intended (b) Description Category (See categories listed at the top of this schedule) **PURPOSE** Check If travel outside of Texas, complete Schedule T OF 6ttre Ovelean **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if direct Office sought expenditure to benefit C/OH SALSO Payee name Dallas, TX 75201 political contributions intended Category (See categories listed at the top of this schedule) (b) Description **PURPOSE** Check if travel outside of Texas, complete Schedule T OF Office Overhead **EXPENDITURE** Check if Austin, TX, officeholder living expense Office sought Office held Complete ONLY if direct expenditure to benefit C/OH

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundralsing Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Clib (Charles Land Reports)

Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor Other (enter a category not listed above) The Instruction Guide explains how to complete this form.				
1 Total pages Schedule G:	2 FILER NAME ED GARZA	3 Filer ID (Ethics Commission Filers)		
4 Date 6-9-15	5 Payee name AMERICAN MINI	STORAGE		
Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 3567 Frederile	STORAGET CShy Rol SAT 78201		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Owned	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/		Office sought Office held		
Date	Payee name	я		
Amount (\$)	Payee address; City; State; Zip Code			
political contributions intended		To a second seco		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	(b) Description Check if travel outside of Texas, complete Schedule T 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		
Date	Payee name	7		
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)	(b) Description Check if travel outside of Texas, complete Schedule T 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				