CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

P.O. Box 12070

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	М	OFFICE USE ONLY
NAME	Mrs Laura	<u> </u>	Date Received
•	NICKNAME LAST MOTRISON	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	address 190 Box; aptisuite#; city; 610 Box 105 St., Austin	TX 18763	Date Hand-delivered Postmerse
change of address	ATT CODE DUONE WINDER	EVTENDION	Receipt # Amount
5 CANDIDATE/ OFFICEHOLDER PHONE	(512) 974-2258	EXTENSION	Date Processed 3
6 CAMPAIGN TREASURER	MS/MRS/MR FIRST	MI .	Date Imaged
NAME	Mr Mark NICKNAME LAST Perlynutter	SUFFIX	
7 CANPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO POBOX PLEASE): APT SUITE # 1717 W. 6 th St Suite Austin, TX 78703	CITY; STATE;	ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (S12) 4764944	EXTENSION	
9 REPORT TYPE	January 15 30th day before election	Runoff	15th day after campaign treasurer appointment
	July 15 8th day before election	Exceeded \$500	(officeholder only) Final report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year THROUGH	Month Day	Year /13
11 ELECTION	ELECTION DATE Month Day Year ELECTION TYPE Primary	Runoff	General Special
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known	1)
	Austin City Council Place 4		
	GO TO PA	GE2	

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

SUPPORT	& IOIAL		
14 C/OH NAME	00		ACCOUNT # (Ethics Commission Filers)
LAURA	MORRISO	N	
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		<u>·</u>
		COMMITTEE ADDRESS	
	SPECIFIC		
,		COMMITTEE CAMPAIGN TREASURER NAME	
additional pages			<u> </u>
1:		COMMITTEE CAMPAIGN TREASURER ADDRESS	2
			- I was a supplementary of the same of the
17 CONTRIBUTION TOTALS	1. TOTAL PLEDG	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER HAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0 -
	2. TOTAL (OTHER	POLITICAL CONTRIBUTIONS OF THE PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0-
EXPENDITURE TOTALS	3. TOTAL P	OLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZE	* O -
	4. TOTAL	POLITICAL EXPENDITURES	\$ 1455.86
CONTRIBUTION BALANCE		OLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY DRTING PERIOD	\$ 1960.36
OUTSTANDING LOAN TOTALS		RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LY OF THE REPORTING PERIOD	\$ 0 -
18 AFFIDAVIT			
	ANN MARGRETT F MY COMMISSION 1 October 17, 2	EXPIRES	ormation required to be reported by
AFFIX NOTARY STAM	P / SEAL ABOVE	i a	
Sworn to and subs	scribed before	me, by the said Laura Morrison	, this the
$\frac{15}{2}$ day	of Darrio	<i>u</i> •	hand and seal of office.
(Inn Margett	Louli	Ann Margrett Franklin 1	lotarg
Signature of office admi	nistering oath	Printed name of officer administering oath	Title of difficer administering oath

POLITICAL EXPENDITURES

SCHEDULE F

			NOV 0/-1	
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense	E CATEGORIES FOR Salaries/Wages/Contract Solicitation/Fundraising Travel In District Travel Out Of District Office Overhead/Rental	Labor Loan Rep. Expense Transporta Contribution Candid	ayment/Reimbursement stion Equipment & Related Expense ons/Donations Made By ate/Officeholder/Political Committee onter a category not listed above)
	The Instruction Guid	e explains how to comp	olete this form.	<u></u>
Total pages Schedule F:	2 FILER NAME LAURA MOTTISO	N	3 A	CCOUNT # (Ethics Commission Filers)
8/5/13	5 Payee name South Austin D			
Amount (\$)		tate; Zip Code		
\$100	PO BOX 152592			
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the tr Contributions / Donations / Candidate/Officeholder/A	Made By	Sponsership of 2 Daws BBQ Aw	ide of Texas, complete Schedule T) 6th Ahnual Yeller was Dinner
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name	•	Office sought	Office held
Date 8/12/13	Payee name ECHO (Ending Comm		ines - Organi &	ation)
Amount (\$)		tate; Zip Code		
\$240.86	100 N. 1H 35 SHE 100	13, Austin, TX	7870/	
PURPOSE	Category (See categories listed at the t	op of this schedule)	Description (If travel out	side of Texas, complete Schedule 1)
OF EXPENDITURE	Food / Beverage Expense	For	od for Veteran	r Housing Event
Complete ONLY if direct expenditure to benefit C/	Candidate / Officeholder nam DH	e .	Office sought	Office held
Date 8/28/13	Payee name Austin AFL-CID	Council		
Amount (\$)	Payee address; City; S	State; Zip Code		
\$215	PO BOX 301074,	Austin, TX	78703	<u> </u>
		(41)	Description (If travel out	
PURPOSE OF EXPENDITURE	Category (See categories listed at the Contributions / Donations () Candidate / Office holder / R	lade By Sp	consorship of 201	Celebration
OF	Contributions/Donations M. Candidate/Officeholder/P. Candidate/Officeholdernam	lade 184 Sp slitical Committee		3 Labor Day
OF EXPENDITURE Complete ONLY if direct	Contributions/Donations M. Candidate/Officeholder/P. Candidate/Officeholdernam	lade 184 Sp slitical Committee	onsorship of 201	3 Laber Day Celebration
OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/d	Contributions/Donations M. Candidate/Officeholder/P. Candidate/Officeholder nam OH Payee name UT Austin	lade By Sp Sp. 11 t 1 cal Committee	Office sought	3 Labor Day Celcbration Office held
OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/A Date 10129113 Amount (\$)	Contributions/Donations M. Candidate/Officeholder/R Candidate/Officeholder nam OH Payee name UT Austin	State: Zip Code Nterfor Civic Englope of this schedule) Toole By Spale Symmittee	Office sought Gasement Mustin, TX 79	3 Labor Day Celcbration Office held 3752 Side of Texas, complete Schedule T) moul Stockt ijett 2014
OF EXPENDITURE Complete ONLY if direct expenditure to benefit C// Date / 0/29/13 Amount (\$) \$ 200 PURPOSE OF	Candidate / Office holder / P. Candidate / Office holder / P. Candidate / Office holder / P. Candidate / Office holder nam OH Payee name UT Austin Payee address; City; S. UT Austin / Longhorn Co. 505 East Huntland Category (See categories listed at the II Contributions / Donations A. Candidate / Office holder Police Candidate / Office holder	State: Zip Code Interfer Civic English By Open of this schedule) Thoole By Acad Committee Vo	Office sought Gasement Austin, TX 79 Description (It travel out Description of 4th A	3 Labor Day Celcbration Office held 3752. Side of Texas. complete Schedule T) rnual Stolcht

EXPENDITURE CATEGORIES FOR BOX 8(a)

POLITICAL EXPENDITURES

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense	Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Politing Expense	Salaries/Wages/Col Solicitation/Fundrais Travel In District Travel Out Of District Office Overhead/Ro	sing Expense	Loan Repayment/Reim Transportation Equipm Contributions/Donation Candidate/Officehol OTHER (enter a categi	ent & Related Expense s Made By Ider/Political Committee
Fees	Printing Expense The Instruction Guide		· ·		
1 Total pages Schedule F:	2 FILER NAME LAURA MORRISON				Ethics Commission Filers)
4 Date 11/22/13	5 Payee name NAACP		>		
6 Amount (\$)	7 Payee address; City; Sta	ite; Zip Code			
· \$75	1709 E.12th St., Au	istin, TX 79	3762		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top Contributions By matters Candidate Office holder / Palit	mode by	Sponsorship of Freedom Fo	liftraveloutside of Texas.co of 48th Annual I and Banquet	omplete Schedule T) Dr. Witty / Overton Office held
9 Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name OH	·	Office sought	·	Office field
Date 12/2/13	Payee name Texas Low Income 1-	lousing Info	rmation-Sc	rvice	
Amount (\$)	Payee address; City; St	te: Zip Code		_	
\$125	508 POWELL, Austin	,TX 18703	• .		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top Contributions / Donations Ma Candidate/ Officeholder/Pa	de By		of 2013 House	
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name OH		Office sought	·	Office held
Date /2/10/13	Payee name Black Austin Democ	rats Politica	1 Action Con	nmillee	
Amount (\$)	1	ate; Zip Code	_		
\$500	P.O. BOX 212, Austi	n, 1x 78	762	· ·	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top Contributions/Donations Mi Candidate/Officeholder/Poi	adr By	Sponsorship	of Austin Trail	omplete Schedule Ti Blazers Brunch
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name		Office sough	t j	Office held
Date	Payee name		·		
Amount (\$)	Payee address; City; Sta	ate; Zip Code			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top	o of this schedule)	Description	(If travel outside of Texas. c	omplete Schedule T)
Complete ONLY if direct expenditure to benefit C/	Candidate / Officeholder name		Office sough	t .	Office held
	ATTACH ADDITIONAL C	OPIES OF THIS	SCHEDULE AS	NEEDED	

Office of the City Clerk, 20.36

BANK RECONCILIATION

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

Name of candidate, officeholde	r or campaign committee: <u>LAU</u>	IRA MORRISON
For each checking, savings or of the following information indic	ated. For each additional institu	t maintained during 20 <u>/3</u> , enter ution, use a copy of this schedule.
The name of the financial instit	ution: University Credit 1	Non.
Type of account: Checking		<i>Y</i>
The beginning balance: #433	34.22	
The ending balance: $\frac{\beta/960}{100}$. Enter the following information		ant that have not cleared by
December 31:	Tor enecks issued on that decor	in the nave not element by
Date	Payee	Amount
N/A		
- · · · · · · · · · · · · · · · · · · ·		
Enter the following information by the contributor's financial in		ions and deposited but dishonored
Date of receipt	Contributor	Amount
N/A		
		
Amount of interest or dividends	s earned:	

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
A//A		

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

Date of receipt	Contributor	Amount
N/A		
		,

EXEMPTION STATEMENT

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

NAME OF CANDIDATE OR COMMITTEE:
MORRISON LAWRO C
Morrison Laws C (Last) (First) (Middle)
ADDRESS: 610 Baylor St, Austin, TX 78703
DATE OF FILING: 1/15/14
STATEMENT
I/we, LAURA MORRISA (Name of Candidate or Committee), have not raised and do not intend to raise more than \$30,000 in contributions for the campaign period of the power of the campaign period of the campaign of
Signed by Candidate or Campaign Committee
1/15/14 Date
Date
NOTE: The Code requires that if contributions exceed \$30,000, subsequent Campaign Finance Reports (C&E) must be filed electronically.