FORM C/OH **CANDIDATE / OFFICEHOLDER** COVER SHEET PG 1 CAMPAIGN FINANCE REPORT ACCOUNT # 2 PAGE# The C/OH INSTRUCTION GUIDE explains how to complete this form. (Ethics Commission filers) 00000078 CANDIDATE / MS/MRS/MR **OFFICE USE ONLY OFFICEHOLDER** Mike NAME Date Received LAST NICKNAME SUFFIX Martinez ADDRESS / PO BOX; APT / SUITE #; ZIP CODE CANDIDATE / OFFICEHOLDER MAILING 2314 East 11th St. **ADDRESS** Date Hand-delivered or Date Recomarked Austin, TX 78702 Change of Address Receipt # Amount MS/MRS/MR FIRST **CAMPAIGN Date Processed** TREASURER Celia NAME Date Imaged SUFFIX NICKNAME LAST Israel CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER ADDRESS** 3604 Carla Drive Austin, TX 78754 (Residence or business) **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 933-1796 PHONE **8 REPORT TYPE** January 15 30th day before election Runoff 15th day after campaign treasurer X appointment (officeholder only) Final report (Attach C/OH - FR) Exceeded \$500 limit 8th day before election 9 PERIOD Month Year Day Year Day COVERED THROUGH 12/31/2013 07/01/2013 **10 ELECTION ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff X General Special 05/12/2012 11 OFFICE 12 OFFICE SOUGHT (if known) OFFICE HELD (if any) City Council, Place 2 **GO TO PAGE 2**

(512)463-5800 TDD 1-800-735-2989 P.O. Box 12070 Austin, Texas 78711-2070 Texas Ethics Commission CANDIDATE / OFFICEHOLDER REPORT: FORM C/OH COVER SHEET PG 2 SUPPORT & TOTALS 13 C/OH NAME Martinez, Mike 14 ACCOUNT # (Ethics Commission filers) 00000078 .. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may **15 NOTICE** have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this FROM information only if they receive notice of such expenditures. ... **POLITICAL** COMMITTEE NAME COMMITTEE TYPE COMMITTEE(S) GENERAL COMMITTEE ADDRESS SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME additional pages COMMITTEE CAMPAIGN TREASURER ADDRESS **16 CONTRIBUTION** TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN 1. 0.00 \$ **TOTALS** PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED 2. **TOTAL POLITICAL CONTRIBUTIONS** \$ 0.00 (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) **EXPENDITURE** TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$ **TOTALS** 0.00 **TOTAL POLITICAL EXPENDITURES** 6,618.88 CONTRIBUTION TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE BALANCE 3.414.59 LAST DAY OF THE REPORTING PERIOD OUTSTANDING TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE **LOAN TOTALS** LAST DAY OF THE REPORTING PERIOD 0.00 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. STACEY KRUSE Commission Expires June 03, 2017 Signature of Candidate or Officeholder AFFIX NOTARY STAMP / SEAL ABOVE Sworp to and subscribed before me, by the said MUKEMAN fine this the to certify which, witness my hand and seal of office

Print name of officer administering oath

Title of officer administering oath

Complete ONLY if

direct expenditure to benefit C/OH

Candidate / Officeholder name

P.O.Box 12070 POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Salaries/Wages/Contract Labor Solicitation/FundraisIng Expense Travel In District Advertising Expense Accounting/Banking Consulting Expense Gifts/Awards/Memorial Expense Loan Repayment/Reimbursement Loan Repayment/Remoursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Legal Services Food/Beverage Expense Event Expense Polling Expense Travel Out Of District Office Overhead/Rental Expense Printing Expense The Instruction Guide explains how to complete this form. 2 FILER NAME 3 ACCOUNT # (TEC filers) 1 PAGE# Martinez, Mike 00000078 Schedule: 1/5 Report: 3/7 5 Payee name Date 08/10/2013 Austin AFL-CIO Council 6 Amount (\$) Payee address City; State; Zip Code 1106 Lavaca Street \$310.00 #200 Austin, TX 78701 (a) Category (See Categories listed at the top of this schedule) (b) Description (if travel outside of Texas, complete Schedule T) 8 **PURPOSE** Advertising Expense Labor Day Ad OF **EXPENDITURE** 9 Complete ONLY if Office sought: Office held: Candidate / Officeholder name direct expenditure to benefit C/OH Date Payee name 11/27/2013 Austin NAACP City; State; Payee address Amount (\$) Zip Code 1709 East 12th Street \$150.00 Austin, TX 78702 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description **PURPOSE** Advertising Expense Dewitty/Overton Banquet Ad OF EXPENDITURE Office held: Complete ONLY if Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH Date Payee name 09/24/2013 Austin Police Association City; State; Zip Code Amount (\$) Payee address 5817 Wilcab Road \$500.00 Austin, TX 78721 (If travel outside of Texas, complete Schedule T) Description Category (See Categories listed at the top of this schedule) **PURPOSE CLEAT Ad/Event Sponsorship** Advertising Expense OF **EXPENDITURE** Candidate / Officeholder name Office sought: Office held: Complete ONLY if direct expenditure to benefit C/OH Date Payee name 08/01/2013 Brown, Shamar Amount (\$) Payee address City; State; Zip Code Requested \$150.00 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Salaries/Wages/Contract Labor Intern Salary **EXPENDITURE**

Office held:

Office sought:

POLITICAL EXPENDITURES

SCHEDULE F

Advertising Expense Accounting/Banking

Texas Ethics Commission

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

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By

Event Expense	Polling Expense Travel Out Of Dis	trict Candidate/Officeholder/Political Committee
Fees	Printing Expense Office Overhead/	•
4 0400#	2 FILER NAME	3 ACCOUNT # (TEC filers)
1 PAGE# Schedule: 2/5 Re	eport: 4/7 Martinez, Mike	00000078
4 Date	5 Payee name	
10/09/2013	Burnt Orange Report	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$250.00	4505 Duval Street #229	
1	#229 Austin, TX 78751	
 	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Taxas, complete Schedule T)
8 PURPOSE	Contributions/Donations Made By	10th Anniversary Fundraiser Donation
OF EXPENDITURE	Candidate/Officeholder/Political Committee	, , , , , , , , , , , , , , , , , , , ,
EXPENDITURE		
9 Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		
	Payer rame	
Date 08/03/2013	Payee name Channel Austin	•
Amount (\$)	Payee address City; State; Zip Code	
	1143 Northwestern Ave.	
\$250.00	Austin, TX 78702	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Contributions/Donations Made By	Contribution for 40th Anniversary Fundraiser
EXPENDITURE	Candidate/Officeholder/Political Committee	
		0500 514
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		
Date	Payee name	
11/06/2013	CheckMark Typesetting	
Amount (\$)	Payee address City; State; Zip Code	
\$350.00	3217 N. IH-35	
	Austin, TX 78722	
	Catagony (Can Catagonian listed at the transf big catagonia)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Category (See Categories listed at the top of this schedule) Event Expense	T-Shirt Sponsorship for Get Covered America Kickoff
OF	Event Expense	Total opolicolompilo, our obvoice validation
EXPENDITURE		
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		
Date	Payee name	
08/09/2013	ECHO	
Amount (\$)	Payee address City; State; Zip Code	
\$243.85	l	
ΨΖΨΟ.ΘΟ	Ste. 1003	
}	Austin, TX 78701	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Food/Beverage Expense	ECHO Event Food Sponsorship
EXPENDITURE		
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		

POLITICAL EXPENDITURES

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 Solicitation/Fundraising Expense Travel In District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)

Travel Out Of District
Office Overhead/Rental Expense Printing Expense The INSTRUCTION GUIDE explains how to complete this form. 3 ACCOUNT # (TEC filers) 2 FILER NAME 1 PAGE# Martinez, Mike 00000078 Schedule: 3/5 Report: 5/7 4 Date 5 Payee name El Ceviche Grill 09/27/2013 City; State; Zip Code 6 Amount (\$) Pavee address 115 San Jacinto Blvd. \$811.88 Austin, TX 78701 (b) Description (a) Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) 8 **PURPOSE** Dinner Sponsorship for Saltillo Delegation Food/Beverage Expense OF EXPENDITURE Candidate / Officeholder name Office sought: Office held: 9 Complete ONLY if direct expenditure to benefit C/OH Date Payee name 11/01/2013 Freytag's Florist City; State; Payee address Zip Code Amount (\$) 2211 W. Anderson Lane \$55.15 Austin, TX 78757 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Flowers for Funeral Gifts/Awards/Memorials Expense **OF** EXPENDITURE Office held: Complete ONLY if Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH Date Pavee name Gattis Pizza 08/22/2013 Amount (\$) Payee address City; State; Zip Code 701 W 6th Street \$82.00 Austin, TX 78701 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** Food Sponsorship for River City Youth Foundation Food/Beverage Expense OF EXPENDITURE Office held: Complete ONLY if Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH Date Payee name 12/02/2013 Greater Austin Hispanic Chamber of Commerce Amount (\$) Payee address City; State; Zip Code 2800 South IH-35 \$200.00 Suite 260 Austin, TX 78704 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Membership Dues Fees OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held:

Texas Ethics Commission

direct expenditure to benefit C/OH

POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Advertising Expense Accounting/Banking Gifts/Awards/Memorial Expense Loan Repayment/Reimbursement Legal Services Food/Beverage Expense Polling Expense Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Consulting Expense Event Expense Travel Out Of District Office Overhead/Rental Expense Printing Expense The instruction Guide explains how to complete this form. 2 FILER NAME 3 ACCOUNT # (TEC filers) 1 PAGE# Martinez, Mike 00000078 Schedule: 4/5 Report: 6/7 4 Date 5 Payee name Latino Health Care Forum 12/12/2013 Payee address City; State; Zip Code 6 Amount (\$) P.O. Box 1271 \$600.00 Austin, TX 78767 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 **PURPOSE** Contributions/Donations Made By PSA Sponsorship **OF** Candidate/Officeholder/Political Committee EXPENDITURE 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Payee name Date 09/25/2013 Lillith Fund Payee address City; State; Zip Code Amount (\$) P.O. Box 684949 \$100.00 Austin, TX 78768 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description PURPOSE Contributions/Donations Made By Donation/Event Sponsorship OF EXPENDITURE Candidate/Officeholder/Political Committee Office held: Candidate / Officeholder name Office sought: Complete ONLY if direct expenditure to benefit C/QH Date Payee name 08/15/2013 Mendez Middle School Payee address City; State; Zip Code Amount (\$) 5106 Village Square Austin, TX 78744 \$500.00 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** Contributions/Donations Made By Candidate/Officeholder/Political Committee Clothing Fund Donation OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name **PODER** 10/09/2013 Amount (\$) Payee address City; State; Zip Code P.O. Box 6237 \$96.00 Austin, TX 78762 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) **PURPOSE** Contributions/Donations Made By Affordable Housing Fair Sponsorship Candidate/Officeholder/Political Committee **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office held: Office sought:

Austin, Texas 78711-2070 **Texas Ethics Commission** P.O.Box 12070 **POLITICAL EXPENDITURES** SCHEDULE F **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 Gifts/Awards/Memorial Expense Advertising Expense Accounting/Banking Consulting Expense Event Expense Legal Services Food/Beverage Expense Polling Expense Travel Out Of District OTHER (enter a category not listed above) Office Overhead/Rental Expense Printing Expense The Instruction Guide explains how to complete this form. 3 ACCOUNT # (TEC filers) 2 FILER NAME 1 PAGE# Martinez, Mike 00000078 Schedule: 5/5 Report: 7/7 4 Date 5 Payee name Pratham USA 09/06/2013 Payee address City; State; Zip Code 6 Amount (\$) 9703 Richmond Avenue \$570.00 Suite 102 Houston, TX 77042 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 **PURPOSE** Contributions/Donations Made By Pratham Gala Sponsorship OF Candidate/Officeholder/Political Committee EXPENDITURE 9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought: Office held: Date Payee name 09/30/2013 Senate Hills Homeowners Association City; State; Zip Code Payee address Amount (\$) P.O. Box 15381 \$50.00 Austin, TX 78761 Description (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) **PURPOSE Event Expense** National Night Out Food Sponsorship OF **EXPENDITURE** Office held: Candidate / Officeholder name Office sought: Complete ONLY if direct expenditure to benefit C/OH Date Payee name Southwest Key Programs 08/10/2013 City; State; Zip Code Amount (\$) Payee address 6002 Jain Lane \$600.00 Austin, TX 78721 (If travel outside of Texas, complete Schedule T) Description Category (See Categories listed at the top of this schedule) **PURPOSE** Contributions/Donations Made By Candidate/Officeholder/Political Committee 9th Annual Fore the Kids Sponsorship OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Travis County Democratic Party 09/03/2013 City; State; Zip Code Amount (\$) Payee address 1311 E 6th St. \$750.00 Austin, TX 78702 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) **PURPOSE** Contributions/Donations Made By 40th Anniversary Fundraiser Contribution **OF** Candidate/Officeholder/Political Committee **EXPENDITURE**

Candidate / Officeholder name

Complete ONLY if

direct expenditure to benefit C/OH

Office held:

Office sought:

BANK RECONCILIATION

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

Name of candidate, officeholder or o	campaign committee: <u>Mike N</u>	Martinez_
For each checking, savings or oth following information indicated. For		
The name of the financial institution:	University Federal Credit Un	ion
Type of account: Officeholder Savir	JBZ	
The beginning balance: \$5.00		
The ending balance: \$5.00		
Enter the following information for cl 31:	hecks issued on that account the	at have not cleared by December
Date	Payee	Amount
Enter the following information for of the contributor's financial institution:	checks received as contribution	s and deposited but dishonored by
Date of receipt	Contributor	Amount
Amount of interest or dividends earn	ed:	

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

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: Mike	Martinez_
For each checking, savings or ot following information indicated. For		t maintained during 2013, enter the a copy of this schedule.
The name of the financial institution	: University Federal Credit U	nion_
Type of account: <u>Officeholder Mo</u>	ney Market Account_	
The beginning balance: \$0.05		
The ending balance: <u>\$0.05</u>		
Enter the following information for a 31:	checks issued on that account t	hat have not cleared by December
Date	Payee	Amount
Enter the following information for the contributor's financial institution		ons and deposited but dishonored by
Date of receipt	Contributor	Amount
Amount of interest or dividends ear	med:	

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

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

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

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:	Mike Martinez	
For each checking, savings or off following information indicated. For			
The name of the financial institution:	University Federal C	Credit Union	
Type of account: Officeholder Che	cking		
The beginning balance: \$0.00			
The ending balance: <u>\$3414.59</u> Enter the following information for c	thecks issued on that ac	ccount that have not cleared by	December
31:		·	
Date	Payee	Amount	ţ
Enter the following information for the contributor's financial institution:	checks received as con	ntributions and deposited but d	ishonored by
Date of receipt	Contributor	Amount	t
Amount of interest or dividends earn	ned: _ <u>\$1.06</u>		

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

Office of the City Clerk, 20.36

Date of deposit or withdrawal	Amount of deposit	Amount of withdrawal
1/31/13	\$0.13 (interest)	
2/28/13	\$0.12 (interest)	
3/31/13	\$0.12 (interest)	
4/30/13	\$0.11 (interest)	
5/31/13	\$0.10 (interest)	
6/30/13	\$0.09 (interest)	
7/31/13	\$0.09 (interest)	
8/31/13	\$0.09 (interest)	
9/30/13	\$0.07 (interest)	
10/31/13	\$0.05 (interest)	
11/30/13	\$0.05 (interest)	
12/31/13	\$0.04 (interest)	

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

Date of receipt	Contributor	Amount