# GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

# FORM GPAC COVER SHEET PG 1

	,					
The GPAC Instruction Gu	The GPAC Instruction Guide explains how to complete this form.  1 ACCOUNT # (Ethics Commission filers)					
\$ V		00064953	·	1 of 11	20	
3 COMMITTEE NAME				OFFICE U	ISEONLY E	
Texans for Accoun	table Government			Date Received		
,			•	·	REC	
					SEN CIT	
4 COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #;	CITY; STATE;	ZIP CODE	1	IN CITY CI RECEIVED	
ADDRESS .	1306 Baronets Trl Austin, TX 78753				1 [E]	
. Change of Address	Austin, 1X 76755			Date Hand-delivered	or Date Postmarked	
E CAMPAICAL	MS/MRS/MR FIRST	· · · · · · · · · · · · · · · · · · ·	MI		<b>-</b>	
5 CAMPAIGN TREASURER	Mr. Trey	N.	AVII			
NAME				Receipt # `	Amount	
	NICKNAME LAST Reginelli		SUFFIX	Date Processed		
		·		Date Imaged		
6 CAMPAIGN TREASURER'S	STREET ADDRESS (NO PO BOX PLEASE); APT /	SUITE #; CITY;	STATE;	ZIP CODE		
STREET ADDRESS	1306 Baronets Trl Austin, TX 78753				,	
(Residence or business)	Traditit, TX 76766					
7 CAMBAICN	STREET OR PO BOX; AF	PT/SUITE#; CIT	TY; STAT	E; ZIP (	CODE	
7 CAMPAIGN TREASURER'S						
MAILING ADDRESS	1306 Baronets Tri					
	Austin, TX 78753		*.			
Change of Address		•				
·						
8 CAMPAIGN TREASURER	AREA CODE PHONE NUMBER	EXTENSIO	М		•	
PHONE	(832) 515-7550					
9 REPORT TYPE	[] (	-lat				
, .	January 15 30th day before a 8th day before el			Dissolution (att	ach PAC-UR)	
	X July 15 Runoff			10th day after of treasurer termin		
10 PERIOD	Month Day Year	Mont	th Day	Year		
COVERED	01/01/2014	HROUGH	06/30/2	014	٠.	
44 54 5071011						
11 ELECTION	Month Day Year					
	l' Pri	imary Runoff		General	Special	
	<del> </del>				· · · · · · · · · · · · · · · · · · ·	
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			4			
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## **GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS**

P.O:Box 12070

### FORM GPAC COVER SHEET PG 2

12	COMMITTEE Texa	ans for Accountable	Government	ACCOUNT# 00064953
	*.			
13	COMMITTEE ACTIVITY	1. Candidates	A. Supported	
		(identify by name or, if applicable,		
	(Attach lists on	classify by party)	B. Opposed	
	plain paper to	2 Management	A. Supported	· · · · · · · · · · · · · · · · · · ·
	complete this	2. Measures ···		•
	report if necessary.)	(describe by date and location of		<u>.</u>
	noocasary, y	election and nature of issue)	B. Opposed	
1	** · ·	<del></del>		<del> </del>
	**	Officeholders     Assisted		
		(identify by name		•
		or, if applicable, classify by party)		
14	CONTRIBUTION	1. TOTAL POLIT	CAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 1,050.00
	TOTALS	(OR \$100 OR I	LESS IF QUALIFIED FOR HIGHER THRESHOLD)	Ι,030.00
			ere if this report qualifies for the higher itemization thres	hold.
	• .		ITICAL CONTRIBUTIONS I PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2,787.12
		(	· · · · · · · · · · · · · · · · · · ·	2,707.12
• • •	EXPENDITURE	3. TOTAL POLIT	ICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	
,	TOTALS	J. J. TOTALT OLIT	CAL CAP ENDITORES OF \$100 ON EESS, ONLESS TEMIZEE	208.11
		4. TOTAL POL	ITICAL EXPENDITURES	
	1			\$ 3,247.96
	CONTRIBUTION BALANCE	5. TOTAL POLITI	ICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY	\$ 6,030.28
	BALANCE	or me ker c	ACTION LINES	Ψ 0,030.28
• • •	OUTSTANDING	6. TOTAL PRINC	IPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE	-
	LOAN TOTALS		THE REPORTING PERIOD .	\$ 0.00
	,			· "
15	AFFIDAVIT		· · · · · · · · · · · · · · · · · · ·	
	ALTIDATI		I swear, or affirm, under penalty of	Control of the Contro
			report is true and correct and include	
	4		reported by me under Title 15, Elec	
		•	ropolitod by this diddor rigo to, bloc	7.1011 GGGG.
			·	
			Trey Reginelli	
				, ·.
			Signature of Ca	mpaign Treasurer
ΑĖ	FIX NOTARY STAMP / SEA	AL ABOVE		. *
		2	•	
Sv	worn to and subscribed	d before me, by the sa	aid	, this theday
οf.	,20	, to certify w	which, witness my hand and seal of office.	
		*.		
_	Signature of officer admir	nistering oath	Printed name of officer administering oath Ti	tle of officer administering oath
`	Jigriature of Officer adition	notoing out		ac of officer administering cath
			•	· · · · · · · · · · · · · · · · · · ·

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

				<del></del>	
	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/9	5 Report: 3/11
2	FILER NAME	Texans for Accountable Government		3 ACCOUNT# 00064953	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID: Arman, Justin (Mr.)	<b>#</b>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	01/31/2014	6 Contributor address; City; State; Zip Code 2052 Club Crossing New Braunfels, TX 78130		\$10.00	 
			~	(If travel outside of	Texas, complete Schedule T)
9	Principal occup Web Designe	ation / Job title (See Instructions)	10 Employer (See In Self	structions)	,
	Date	Full name of contributor	<b>*</b>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	02/28/2014	Contributor address; City; State; Zip Code 2052 Club Crossing New Braunfels, TX 78130		\$10.00	 
٠				(If travel outside of	Texas, complete Schedule T)
	Principal occup Web Designe	eation / Job title (See Instructions)	Employer (See In Self	structions)	
	Date	Full name of contributor	<u>‡</u> )	Amount of contribution (\$)	In-kind contribution   description (if applicable)
	03/31/2014	Contributor address; City; State; Zip Code 2052 Club Crossing New Braunfels, TX 78130		\$10.00	 
ı				(If travel outside of	Texas, complete Schedule T)
	Principal occup Web Designe	ation / Job title (See Instructions)	Employer (See In Self	structions)	
	Date	Full name of contributor	¥	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/28/2014	Contributor address; City; State; Zip Code 2052 Club Crossing New Braunfels, TX 78130		\$180.00	I 1 I
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Web Designe	pation / Job title (See Instructions) er	Employer (See In Self	structions)	
	. Date	Full name of contributor	<del>*</del> )	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/30/2014	Contributor address; City; State; Zip Code 2052 Club Crossing New Braunfels, TX 78130		\$10.00	 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Web Designe	ation / Job title (See Instructions)	Employer (See In Self	structions)	

<b>POLITICAL</b>	_ CONTRIBUTIONS	
OTHER TH	IAN PLEDGES OR LOANS	

	OTHER THAN PLEDGES OR LOANS							
TI	ne Instructio	N GUIDE explains how to complete this form.		1 PAGE# Schedule: 2/5	Report: 4/11			
2 FII	LER NAME	Texans for Accountable Government		3 ACCOUNT # 00064953	(Ethics Commission filers)			
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Arman, Justin (Mr.)	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
05	/31/2014	6 Contributor address; City; State; Zip Code 2052 Club Crossing New Braunfels, TX 78130		\$10.00				
				(If travel outside of	Texas, complete Schedule T)			
	incipal occup /eb Designe	ation / Job title (See Instructions)	10 Employer (See In Self	structions)				
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)			
06	3/30/2014	Contributor address; City; State; Zip Code 2052 Club Crossing New Braunfels, TX 78130		\$10.00	 			
		New Diadilleis, 1X 70150			l .			
<u> </u>		ation ( Inh Bills (Con Institutions)	Franks and Can In	` `	Texas, complete Schedule T)			
	ncipal occup leb Designe	eation / Job title (See Instructions)	Employer (See In Self	structions)				
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)			
01	/07/2014	Contributor address; City; State; Zip Code 2715A Manor Rd Austin, TX 78722		\$25.00	 			
	• •				·			
	rincipal occur	pation / Job title (See Instructions)	Employer (See In	l '	Texas, complete Schedule T)			
	oftware Dev		Lone Star Intern		· · · · · · · · · · · · · · · · · · ·			
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)			
02	2/07/2014	Contributor address; City; State; Zip Code 2715A Manor Rd Austin, TX 78722		\$25.00	!   			
₹				(If travel outside of	Texas, complete Schedule T)			
	rincipal occup oftware Dev	Dation / Job title (See Instructions) veloper	Employer (See In Lone Star Interi	structions)				
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
03	3/07/2014	Contributor address; City; State; Zip Code 2715A Manor Rd Austin, TX 78722		\$25.00°	[ [			
]. ·				(If travel outside of	Texas, complete Schedule T)			
	rincipal occup oftware Dev	pation / Job title (See Instructions) veloper	Employer (See In Lone Star Inter	structions)	Total, complete contents in			
Щ		<u> </u>	l .					

(512)463-5800

# **POLITICAL CONTRIBUTIONS** OTHER THAN PLEDGES OR LOANS

P.O.Box 12070

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	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 3/5	Report: 5/11
2	FILER NAME	Texans for Accountable Government		3 ACCOUNT# 00064953	(Ethics Commission filers)
4	Date	5 Full name of contributor	)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	04/07/2014	6 Contributor address; City; State; Zip Code 2715A Manor Rd Austin, TX 78722	,	\$25.00	 
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Software Dev	eation / Job title (See Instructions) reloper	10 Employer (See In Lone Star Intern		·
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/07/2014	Contributor address; City; State; Zip Code 2715A Manor Rd Austin, TX 78722		\$25.00	l . I
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	* #
	Software Dev		Lone Star Interr		
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/07/2014	Contributor address; City; State; Zip Code 2715A Manor Rd Austin, TX 78722		\$25.00	 
	٠			(If trave) outside of	Texas, complete Schedule T)
	Principal occup Software Dev	ation / Job title (See Instructions) reloper	Employer (See In Lone Star Interr		
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/13/2014	Contributor address; City; State; Zip Code 1205 Summit Edge Austin, TX 78732		\$700.00	 
	=			(if travel outside of	Texas, complete Schedule T)
	Principal occur Sales	pation / Job title (See Instructions)	Employer (See In Zep, Inc.	structions)	,
	Date	Full name of contributor	<u>.</u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	01/15/2014	Contributor address; City; State; Zip Code 1113 Banister Ln # 118 Austin, TX 78704		\$172.12	 
	01/15/2014	1113 Banister Ln # 118			       Texas, complete Schedule T}
		1113 Banister Ln # 118	Employer (See In	(If travel outside of	      Texas, complete Schedule T}

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

P.O.Box 12070

	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 4/5 Report: 6/11			
2	FILER NAME	Texans for Accountable Government		3 ACCOUNT# 00064953	(Ethics Commission filers)		
4	Date	.5 Full name of contributor	ŧ)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	01/16/2014	<b>6</b> Contributor address; City; State; Zip Code 3806 Skipton Dr Austin, TX 78727	,	\$100.00	 		
9	Principal occup Realtor	pation / Job title (See Instructions)	10 Employer (See In Better Homes 8	<u> </u>	Texas, complete Schedule T)		
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)		
	02/03/2014	Contributor address; City; State; Zip Code 6002 Travis Woods Cv. Austin, TX 78734	•••••••	\$50.00			
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Attorney	Dation / Job title (See Instructions)	Employer (See In Self	structions)	₩.		
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	03/14/2014	Contributor address; City; State; Zip Code 6002 Travis Woods Cv: Austin, TX 78734		\$100.00	! !		
	B.C. C. L.			1	Texas, complete Schedule T)		
	Attorney	pation / Job title (See Instructions)	Employer (See In Self	structions)	•		
	Date	Full name of contributor	‡·)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/12/2014	Contributor address; City; State; Zip Code 6002 Travis Woods Cv. Austin, TX 78734		\$50.00	 		
L					f Texas, complete Schedule T)		
	Principal occup Attorney	pation / Job title (See Instructions)	Employer (See In Self	estructions)			
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/24/2014	Contributor address; City; State; Zip Code 6002 Travis Woods Cv. Austin, TX 78734		\$50.00			
1.	4 .			(If travel outside o	f Texas, complete Schedule T)		
	Principal occup Attorney	Dation / Job title (See Instructions)	Employer (See Ir Self	<u> </u>			
			l		A CONTRACTOR OF THE CONTRACTOR		

## **POLITICAL CONTRIBUTIONS** OTHER THAN PLEDGES OR LOANS

L.									
	The INSTRUCTION	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/	5 Report: 7/11				
2	FILER NAME	Texans for Accountable Government		3 ACCOUNT# 00064953	(Ethics Commission filers)				
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Zimmerman, Bo (Mr.)		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)				
	02/25/2014	6 Contributor address; City; State; Zip Code 1907 Cameo Dr. Round Rock, TX 78664		\$25.00	   				
	·	•		(If travel outside of	Texas, complete Schedule T)				
9	Principal occup Software Eng	ation / Job title (See Instructions) ineer	10 Employer (See In Bioware	structions)	<u>.</u>				
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)				
	03/25/2014	Contributor address; City; State; Zip Code 1907 Cameo Dr. Round Rock, TX 78664		\$25.00	 				
		Trouble Troop, TA 1990		(If travel outside of	Texas, complete Schedule T)				
┢	Principal occur	ation / Job title (See Instructions)	Employer (See In		· · · · · · · · · · · · · · · · · · ·				
	Software Eng		Bioware						
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)				
	04/25/2014	Contributor address; City; State; Zip Code 1907 Cameo Dr. Round Rock, TX 78664		\$25.00	 				
	Dringing Language	sation ( lob title (Coe legaterations)	Employer (See In	1 '	Texas, complete schedule ()				
	Software Eng	pation / Job title (See Instructions) pineer	Bioware	istructions)					
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)				
	05/25/2014	Contributor address; City; State; Zip Code 1907 Carneo Dr. Round Rock, TX 78664		\$25.00	] 				
Ì				(If travel outside of	Texas, complete Schedule T)				
	Principal occup Software Eng	pation / Job title (See Instructions) pineer	Employer (See Ir Bioware	nstructions)					
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)				
	06/25/2014	Contributor address; City; State; Zip Code 1907 Carneo Dr. Round Rock, TX 78664		\$25.00	 				
				(If travel outside of	Texas, complete Schedule T)				
-	Principal occur	pation / Job title (See Instructions)	Employer (See In	<u> </u>					
	Software Eng		Bioware	· · · · · · · · · · · · · · ·	,				

SCHEDULE F

**EXPENDITURE CATEGORIES** 

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense

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

		The Instruction Guide explains he	ow to complete this forn	n.		
1 PAGE#		2 FILER NAME	i .	3	ACCOUNT#	(TEC filers)
Schedule: 1/4 Re	port: 8/11	Texans for Accountable Governme	ent		00064953	
<b>∡</b> Date	5 Payee name			I		
04/30/2014	Chuck's Gra	phics LLC		•		
6 Amount (\$)	7 Payee addres				<del></del>	
	17821 Golde	•				1
\$894.70	Manor, TX 7					·
Expenditure from corporate funds	, , , , , , , , ,					
·	(a) Cotogogy (Co.	· · ·	(h) Department (	*************************		
8 PURPOSE	Advertising	e Categories listed at the top of this schedule)	(b) Description (I T-Shirts	f travel outside of Te	ixas, complete S	cnedule ()
OF	Advertising t	Expense	1-311118			
EXPENDITURE						
O Complete ON V.S	Condidate / O	fficeholder name	Office sough		Office held:	
9 Complete ONLY if direct expenditure	Candidate	incendue name	Office sough	II.	Office field.	
to benefit C/OH	, .					
Date	Payee name					
01/22/2014	Constant Co	intact				
Amount (\$)	Payee addres					
***	122 Hudson					
\$37.31	New York,					
Expenditure from corporate funds					•	
	C=1==== . /0:	· Order of the Control of the Contro	Dana-iskin- II			<del></del>
PURPOSE		e Categories listed at the top of this schedule)		f travel outside of Te	exas, complete S	chedule 1) [
OF	Advertising I	Expense	Email List			
EXPENDITURE		·			*	1
Complete ONLY if	Candidate / O	fficeholder name	Office sough	ht:	Office held:	
direct expenditure	Carididate? O	incender name	Onice sough	) II.	Office field.	
to benefit C/OH	·					
Date	Payee name					
02/24/2014	Constant Co	ontact	i			
Amount (\$)	Payee addres	s City; State; Zip Code				
\$37.31	122 Hudson					
Expenditure from	New York, I					
corporate funds						
	Category (Se	e Categories listed at the top of this schedule)	Description (	If travel outside of Te	vas complete S	chedule T\
PURPOSE	Advertising I		Email List	ii itavei ogiside or 16	skas, complete 3	criedule 1)
OF .	Advertising t	Expense	Lindii List			
EXPENDITURE						
Complete ONLY if	Candidate / O	fficeholder name	Office soug	ht.	Office held:	
direct expenditure	Candidate	mocroder righte	Onice soug	iit.	Office field.	
to benefit C/OH	_					
Date	Payee name				-	
03/24/2014	Constant Co			,		
Amount (\$)	Payee addres	· ·		···. ··		
,	122 Hudson	-				
\$37.31	New York,	NY 10013				
Expenditure from corporate funds	[					,
	Category /S-	e Categories listed at the top of this schedule)	Description (	If travel outside of Te	van anmelete C	shedulo T\
PURPOSE	Advertising		Email List	n naver Outside of Te	skas, complete S	criedule I)
OF	Advertising t	ryheilae	Email List		•	
EXPENDITURE						
Complete ON Y T	Candidata ( C	officeholder name	Office carry	he.	Office hald	
Complete ONLY if direct expenditure	Candidate / C	Ancendider Hante	Office soug	iit.	Office held:	
to benefit C/OH	1					

SCHEDULE F

	EXPENDITURE CATEGORI	ES
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	nse Gifts/Awards/Memorial Expense Salaries/Wages/Contra Solicitation/Fundraising Travel In District Printing Expense Office Overhead/Renta	ct Labor Loan Repayment/Reimbursement Expense Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee I Expense OTHER (enter a category not listed above)
	The Instruction Guide explains how to d	complete this form.
1 PAGE# Schedule: 2/4 Re	eport: 9/11 FILER NAME Texans for Accountable Government	3 ACCOUNT # (TEC filers) 00064953
4 Date	5 Payee name	
04/22/2014	Constant Contact	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$37.31  Expenditure from corporate funds	122 Hudson Street New York, NY 10013	
8 PURPOSE	l, , , , , , , , , , , , , , , , , , ,	b) Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Advertising Expense	Email List
EXPENDITURE	<i>:</i>	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 05/22/2014	Payee name Constant Contact	
Amount (\$)	Payee address City, State, Zip Code	
\$37.31	122 Hudson Street	•
Expenditure from corporate funds	New York, NY 10013	
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
OF EXPENDITURE	Advertising Expense	Email List
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
06/23/2014	Constant Contact	
- Amount (\$)	Payee address City; State; Zip Code	
\$37.31	122 Hudson Street	
Expenditure from corporate funds	New York, NY 10013	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Advertising Expense	Email List
OF EXPENDITURE		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 01/15/2014	Payee name Fazio, Heather (Ms.)	
01/15/2014	Fazio, Heather (Ms.)	
01/15/2014 Amount (\$)	l	
01/15/2014	Fazio, Heather (Ms.) . Payee address City; State; Zip Code	
01/15/2014 Amount (\$) \$369.83	Fazio, Heather (Ms.)  Payee address City; State; Zip Code  500 Wilmes Dr.	Description (If travel outside of Texas, complete Schedule T)
O1/15/2014 Amount (\$) \$369.83 Expenditure from corporate funds	Fazio, Heather (Ms.)  Payee address City; State; Zip Code  500 Wilmes Dr. Austin, TX 78705	Description (If travel outside of Texas, complete Schedule T)  2013 Holiday Party Food
O1/15/2014 Amount (\$) \$369.83 Expenditure from corporate funds	Fazio, Heather (Ms.)  Payee address City; State; Zip Code 500 Wilmes Dr. Austin, TX 78705  Category (See Categories listed at the top of this schedule)	
01/15/2014 Amount (\$) \$369.83 Expenditure from corporate funds  PURPOSE OF	Fazio, Heather (Ms.)  Payee address City; State; Zip Code 500 Wilmes Dr. Austin, TX 78705  Category (See Categories listed at the top of this schedule)	

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

to benefit C/OH

**EXPENDITURE CATEGORIES** Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District
Office Overhead/Rental Expense

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

Polling Expense Printing Expense The Instruction Guide explains how to complete this form. 3 ACCOUNT # (TEC filers) 1 PAGE# FILER NAME Texans for Accountable Government 00064953 Schedule: 3/4 Report: 10/11 Payee name Date Fazio, Héather (Ms.) 02/12/2014 Amount (\$) Payee address City; State; Zip Code 500 Wilmes Dr. \$150.65 Austin, TX 78705 Expenditure from corporate funds (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE Event Expense** Event Travel Expenses - Texas Drug Policy OF Conference **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Pavee name 01/16/2014 **FOCUSOGRAPHY Media** Amount (\$) Payee address City; State; Zip Code 2504 Huntwick #1210 \$150.Ó0 Austin, TX 78741 Expenditure from corporate funds Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE Event Expense** Holiday Party Photography OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 01/13/2014 H.O.T. Goodwill Amount (\$) Payee address City; State; Zip Code 1700 S. New Road \$173.19 Waco, TX 76711 Expenditure from corporate funds Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) **PURPOSE Event Expense** Supplies for Texas Drug Policy Conference OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/QH Date Payee name 06/05/2014 Pressley, Laura (Ms.) Amount (\$) Payee address City; State; Zip Code P.O. Box 82763 \$350.00 Austin, TX 78708 Expenditure from corporate funds Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) **PURPOSE** Contributions/Donations Made By Contribution for Austin City Council Campaign OF Candidate/Officeholder/Political Committee EXPENDITURE Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure Pressley, Laura (Ms.) **Austin City Council District 4** 

Candidate / Officeholder name

Complete ONLY if direct expenditure to benefit C/OH

SCHEDULE F

		EXPE	NDITURE CATEG	ORIES		•
Accounting/Banking Legal St Consulting Expense Food/Be Event Expense Polling B		rards/Memorial Expense ervices everage Expense Expense Expense	pense Salaries/Wages/Contract Labor L Solicitation/Fundraising Expense T Travel In District C Travel Out Of District		Transportation Contributions/ Candidate/ OTHER (ente	ent/Reimbursement n Equipment & Related Expense Donations Made By Officeholder/Political Committee r a category not listed above)
1 PAGE#		2 FILER NAME		·		3 ACCOUNT # (TEC filers)
Schedule: 4/4 Re	port: 11/11	Texans for Accour	ntable Governmen	t .		00064953
4 Date	5 Payee name		W".			· · · · · · · · · · · · · · · · · · ·
03/05/2014	Salesforce.c	om, Inc.				
6 Amount (\$)	7 Payee addres	s City; State	; Zip Code		÷	
\$303.81		ark @ One Market		•		
Expenditure from corporate funds	Suite 300 San Francis	co, CA 94105		4		
8		e Categories listed at the top	of this schedule)	(b) Description	(If travel outside	e of Texas, complete Schedule T)
PURPOSE OF	Consulting E	Expense		CRM Licens	se	
EXPENDITURE						•
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / C	fficeholder name		Office so	ught:	Office held:
Date	Payee name			•	-	
06/05/2014	Salesforce.c	om, Inc.				
Amount (\$)	Payee addres	s City; State	; Zip Code			
\$303.81 Expenditure from corporate funds	Suite 300 1	ark @ One Market co, CA 94105				
PURPOSE OF	Category (Se Consulting E	e Categories listed at the top xpense	of this schedule)	Description CRM Licens		e of Texas, complete Schedule T)
EXPENDITURE						
Complete ONLY if direct expenditure to benefit C/OH	Candidate / C	fficeholder name		Office so	ught:	Office held:
Date	Payee name				-	
02/26/2014	Windsor Hill	s Neighborhood Assoc	ciation			·
Amount (\$)	Payee addres	s City; State	; Zip Code			
\$120.00	9510 Dallum					
Expenditure from corporate funds	Austin, TX	(8/53 <u>)</u>				
PURPOSE		e Categories listed at the top	of this schedule)	Description	•	e of Texas, complete Schedule T)
OF	Advertising f	Expense		Newsletter /	Advertisemen	t ·
EXPENDITURE						

Office sought:

Office held: