CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

P.O. Box 12070

FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guit	E explains flow to complete this form.	CCOUNT # thics Commission filers) 0000009	2 PAGE # 1 of 22		
3 CANDIDATE / OFFICEHOLDER	MS/MRS/MR FIRST Delia	МІ	OFFICE USE ONLY		
NAME	NICKNAME LAST Garza	SUFFIX	Date Received 2014 AUSTI		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #: CITY; P.O. Box 41795 Austin, TX 78704	STATE; ZIP CODE	Date Hand-delivered Date Postmarked		
Change of Address			ERK		
			Receipt # CAmount		
5 CAMPAIGN	MS/MRS/MR FIRST	MI	Date Processed		
TREASURER NAME	Jackie		Date Imaged		
	NICKNAME LAST	SUFFIX			
	Goodman				
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; 1010 Austin Highlands Austin, TX 78745	CITY; STATE;	ZIP CODE		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (512) 445-2975	EXTENSION			
8 REPORT TYPE	January 15 30th day before election	Runoff	15th day after campaign treasurer appointment (officeholder only)		
	X July 15 8th day before election	Exceeded \$500 limit	Final report (Attach C/OH - FR)		
9 PERIOD COVERED	Month Day Year	Month Day	Year		
JOVENES	THROUGH 04/08/2014	06/30/20	14		
10 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year Primary 11/04/2014	Runoff X	General Special		
11 OFFICE	OFFICE HELD (if any)	12 OFFICE SOUGHT (if known) City Council District			
GO TO PAGE 2					

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

13 C/OH NAME Garza	i, Delia			ACCOUNT# ((Ethice Commission filers)
15 NOTICE FROM	have been made with	tice of political expenditures by political committ out the candidate's or officeholder's knowledge y receive notice of such expenditures			
POLITICAL COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL	COMMITTEE ADDRESS			
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME			
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS			
···		ONIMITTEE ONITION THE PROPERTY AND THE P			
16 CONTRIBUTION 1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED				\$	2,804.00
2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) EXPENDITURE TOTALS 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED			\$	15,275.00	
			S, UNLESS ITEMIZED	\$	306.28
	4. TOTAL I	POLITICAL EXPENDITURES		\$	7,654.33
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS AY OF THE REPORTING PERIOD	3 OF THE	\$	14,135.76
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING AY OF THE REPORTING PERIOD	LOANS AS OF THE	\$	5,025.00
17 AFFIDAVIT					
	SUSAN C. HAI Notary Public, State My Commission I May 16, 20	is true and come under Titter RRY of Texas Expires	ffirm, under penalty of per prect and includes all info le 15, Election Code. Signature of Canada	ormation require	ed to be reported by
AFFIX NOTARY	STAMP / SEAL ABOV	/E			

Sworn to and subscribed before me, by the said

Delia Garza

1515 day

__, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering path

Print name of officer administering oath

Title of officer administering oath

	The Instruction	N GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/1	15 Report: 3/22
2	FILER NAME	Garza, Delia		3 ACCOUNT # 00000009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Ackerman, Rebecca)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	05/30/2014	6 Contributor address; City; State; Zip Code 600 Fischer Store Rd Wimberley, TX 78676-6147		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Austin Fire De	ation / Job title (See Instructions) epartment	10 Employer (See In: Firefighter	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/19/2014	Contributor address; City; State; Zip Code 1602 Hillcrest Dr San Antonio, TX 78228-2932	************	\$100.00	
				/If traval outside of	Texas, complete Schedule T)
	Principal occur	ation / Job title (See Instructions)	Employer (See In	l '	Texas, complete schedule 1)
	т ппоры оссор	alion / 300 title (Gee Institutions)	Employer (See in	and duonsy	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/14/2014	Contributor address; City; State; Zip Code 1813 Cedar Ave Austin, TX 78702-1429		\$100.00	
		Austiii, 1X 70702-1429		(If travel outside of	Texas, complete Schedule T)
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/20/2014	Contributor address; City; State; Zip Code 4942 View Dr San Antonio, TX 78228-1730		\$350.00	
ļ				(If travel outside of	Texas, complete Schedule T)
	Principal occup OfficeSource	nation / Job title (See Instructions)	Employer (See In Sales Executive		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/14/2014	Contributor address; City; State; Zip Code 11411 Santa Cruz Dr Austin, TX 78759-4953		\$100.00	
				/If travel outside =4	Texas, complete Schedule T)
-	Principal occur	pation / Job title (See Instructions)	Employer (See In	<u> </u>	leves' combiera sollednie i)
	i undipar occup	content out the food management	Employer (Gee III	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,

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	The Instruction	N GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/	15 Report: 4/22
2	FILER NAME	Garza, Delia		3 ACCOUNT# 00000009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Beshur, Alison)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	06/28/2014	6 Contributor address; City; State; Zip Code 21602 Monarch Pass San Antonia, TX 78255-2172		\$100.00	
				<u> </u>	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/14/2014	Contributor address; City; State; Zip Code 4418-A Jester Austin, TX 78745-1044		\$350.00	 -
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Oberto Brand	ation / Job title (See Instructions)	Employer (See In Marketing	`	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/13/2014	Contributor address; City; State; Zip Code 12500 Eagle Nest Dr Buda, TX 78610-2444		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Austin Fire De	ation / Job title (See Instructions) epartment	Employer (See In Firefighter	structions)	
	Date	Full name of contributor	')	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/13/2014	Contributor address; City; State; Zip Code 12500 Eagle Nest Dr Buda, TX 78610-2444	,	\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Austin Fire De	ation / Job title (See Instructions) epartment	Employer (See In Firefighter	structions)	
	Date	Full name of contributor	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/19/2014	Contributor address; City; State; Zip Code 1751 Babcock Rd Apt 516		\$100.00	<u> </u>
		San Antonio, TX 78229-4684		(If travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See In	·	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/1	15 Report: 5/22	
2	FILER NAME	Garza, Delia		3 ACCOUNT# 00000009	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Cavazos, Perla)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	06/30/2014	6 Contributor address; City; State; Zip Code 1108 Fiesta St Austin, TX 78702-3011		\$100.00	 	
				<u> </u>	Texas, complete Schedule T)	
9	Principal occup	eation / Job title (See Instructions)	10 Employer (See In:	structions)	-	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/09/2014	Contributor address; City; State; Zip Code 43 Rainey St No. 2601 Austin, TX 78701-4426		\$250.00	 	
		Austill, 17 70701-4420		(If travel outside of	Texas, complete Schedule T)	
	Principal occur	pation / Job title (See Instructions)	Employer (See In	<u>L'</u>		
	Mitchell & Co		Attorney			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	06/29/2014	Contributor address; City; State; Zip Code 19306 Tree Trail Ct Humble, TX 77346-2094		\$100.00	 	
				L`	Texas, complete Schedule T)	
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/19/2014	Contributor address; City; State; Zip Code 15801 Artist Way Apt 4107 Addison, TX 75001-6178		\$350.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup TriQuint	pation / Job title (See Instructions)	Employer (See In Commodity Ma			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/14/2014	Contributor address; City; State; Zip Code 3310 Big Bend Dr Austin, TX 78731-5311		\$100.00	 	
]				(If travel outside of	Texas, complete Schedule T)	
-	Principal occup	pation / Job title (See Instructions)	Employer (See In	1	TOXOS, COMPLETE SCHEUME 1)	

	The Instruction	N GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/	15 Report: 6/22
2	FILER NAME	Garza, Delia		3 ACCOUNT# 00000009	(Ethics Commission filers)
4	Date	5 Full name of contributor uut-of-state PAC (ID# Estrada, Arnold		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	06/07/2014	6 Contributor address; City; State; Zip Code 13401 Legendary Dr Apt 3103 Austin, TX 78727-3982		\$60.00	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See in	<u> </u>	Texas, complete someone ()
	Date	Full name of contributor	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/19/2014	Contributor address; City; State; Zip Code 6403 Dove Hill Dr San Antonio, TX 78238-3906		\$350.00	₹
				(If travel outside of	Texas, complete Schedule T)
		ation / Job title (See Instructions) affairs consultant	Employer (See In self	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/10/2014	Contributor address; City; State; Zip Code 1005 Bluebonnet Ln Austin, TX 78704-2003		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup none	ation / Job title (See Instructions)	Employer (See In retired	structions)	
	Date	Full name of contributor □ out-of-state PAC (ID# Frank, Abigail	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/11/2014	Contributor address; City; State; Zip Code 1920 Mary Ella Dr Leander, TX 78641-2604		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor ☐ out-of-state PAC (ID# Frank, Abigail	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/06/2014	Contributor address; City; State; Zip Code 1920 Mary Ella Dr Leander, TX 78641-2604		\$38.00	
	<u></u>			L '	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	

	The Instruction	on Guide explains how to complete this form.		1 PAGE # Schedule: 5/	15 Report: 7/22
2	FILER NAME	Garza, Delia		3 ACCOUNT# 00000009	(Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (ID# Frank, Abigail)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
Ì	06/29/2014	6 Contributor address; City; State; Zip Code 1920 Mary Ella Dr Leander, TX 78641-2604		\$50.00	} } !
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In		Texas, compete conceder 1)
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/19/2014	Contributor address; City; State; Zip Code 5902 Fermi Dr San Antonio, TX 78228-3407		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Rodriguez &	Garza PLLC	Attorney		
•	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/19/2014	Contributor address; City; State; Zip Code 5902 Fermi Dr San Antonio, TX 78228-3407		\$350.00	!
		Carrantonia, 1X70220 0407			'
	Deinainat annua	ation (lab 691 (Con Instructions)	Employer (Con In	`	Texas, complete Schedule T)
	Warehouse F	vation / Job title (See Instructions) Turniture Co.	Employer (See In Owner	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/28/2014	Contributor address; City; State; Zip Code 133 Club Dr Luling, TX 78648-3503		\$350.00	
		Lamy, 17 70040-3303			·
	Dringing Lagran	otion (Joh tilla (Con Instructions)	Employer/Cools	<u> </u>	Texas, complete Schedule T)
	Texas Parks	eation / Job title (See Instructions) & Wildlife	Employer (See In Game warden	structions)	
	Date	Full name of contributor □ out-of-state PAC (ID# Graham, Dan	±)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/14/2014	Contributor address; City; State; Zip Code 9309 Leaning Rock Cir Austin, TX 78730-2731		\$350.00	1 1 1
1				(If travel outside of	Texas, complete Schedule T)
	Principal occup Build A Sign	pation / Job title (See Instructions)	Employer (See In CEO	structions)	
	naio v siðu		OLO		

The Instruction	אס Guide explains how to complete this form.		1 PAGE # Schedule: 6/1	15 Report: 8/22
2 FILER NAME	Garza, Delia		3 ACCOUNT# 00000009	(Ethics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Hambright, Susan)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
05/08/2014	6 Contributor address; City; State; Zip Code 8701 Taline Cir Austin, TX 78748-1651		\$50.00	
			'	Texas, complete Schedule T)
9 Principal occup	eation / Job title (See Instructions)	10 Employer (See In:	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/24/2014	Contributor address; City; State; Zip Code 8701 Taline Cir Austin, TX 78748-1651		\$50.00	
		:	(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	<u> </u>	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
05/11/2014	Contributor address; City; State; Zip Code 1077 Burdette Wells Rd Lockhart, TX 78644-4030		\$200.00	
	·		(16 4	Toward accordate Schoolists T)
Principal occur	pation / Job title (See Instructions)	Employer (See In	·	Texas, complete Schedule T)
City of Austin		Firefighter	344040404	
Date	Full name of contributor □ out-of-state PAC (ID# Hernandez-Mena, Roy	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/18/2014	Contributor address; City; State; Zip Code 18 W Woodtimber Ct The Woodlands, TX 77381-3724		\$250.00	1
			(If travel outside of	Texas, complete Schedule T)
Principal occup Baker Hughe	pation / Job title (See Instructions) s, Inc.	Employer (See In Microbiologist	structions)	
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/18/2014	Contributor address; City; State; Zip Code 18 W Woodtimber Ct The Woodlands, TX 77381-3724		\$250.00	
	,		المراجع	Texas, complete Schedule T)
Principal occur	pation / Job title (See Instructions)	Employer (See In	`	10743 complete solledgie ()
	cialist, Neighborhood Services	The Woodlands		_

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/	15 Report: 9/22
2	FILER NAME	Garza, Delia		3 ACCOUNT# 00000009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Ho, Nhat Minh)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	05/08/2014	6 Contributor address; City; State; Zip Code 2117 Robert Browning St Austin, TX 78723-3390		\$200.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup ReNeu Robot	ation / Job title (See Instructions) ics Lab	10 Employer (See In Undergrad Assi		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/24/2014	Contributor address; City; State; Zip Code 7634 Meadow Lawn St San Antonio, TX 78251-1427		\$60.00	
		,	<u> </u>	,	Texas, complete Schedule T)
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor	<u>+</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/13/2014	Contributor address; City; State; Zip Code 11900 Metric Blvd # J163		\$100.00	
		Austin, TX 78758-3152			
				l .	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/28/2014	Contributor address; City; State; Zip Code 602 Franklin Blvd Austin, TX 78751-1802		\$200.00	
		rasan, rx rarar rasz			<u></u>
				<u> </u>	Texas, complete Schedule T)
	Principal occup Hoovers	eation / Job title (See Instructions)	Employer (See In Programmer	structions)	
	Date	Full name of contributor	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/18/2014	Contributor address; City; State; Zip Code 133 W Magnolia Ave Apt 7		\$100.00	
		San Antonio, TX 78212-2979			_
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
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POLITICAL CONTRIBUTIONS

	OTHER	THAN PLEDGES OR LOAD	NS		
	The Instruction	אס GUIDE explains how to complete this form.	-	1 PAGE# Schedule: 8/	15 Report: 10/22
2	FILER NAME	Garza, Delia		3 ACCOUNT# 00000009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Jordan, Ana)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	06/23/2014	6 Contributor address; City; State; Zip Code 1916 Wimberly Ln Austin, TX 78735-1566		\$100.00	! ! !
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/29/2014	Contributor address; City; State; Zip Code 500 W Walter Ave Pflugerville, TX 78660-4723	,	\$200.00	
i)		•		(If travel outside of	Texas, complete Schedule T)
	Principal occup Austin Fire D	ation / Job title (See Instructions) epartment	Employer (See In Battalion Chief	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/06/2014	Contributor address; City; State; Zip Code 214 W 6th Ave Apt 109 Spokane, WA 99204-2436		\$100.00	
	Dringland	pation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule T)
	- ппарагоссор	alion / Job line (See institutions)	Employer (See in	sudcuons)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/31/2014	Contributor address; City; State; Zip Code 101 Colorado St Apt 1602 Austin, TX 78701-4117	,	\$350.00	
	Principal occur	pation / Job title (See Instructions)	Employer (See In	<u> L`</u>	Texas, complete Schedule T)
	Loewy Law F		Lawyer	structions)	
	Date	Full name of contributor ☐ out-of-state PAC (ID# Marin, Jennifer)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/16/2014	Contributor address; City; State; Zip Code 4212 Medical Dr Apt 1101 San Antonio, TX 78229-5618		\$100.00	1
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	

	The Instruction	N GUIDE explains how to complete this form.			1 PAGE # Schedule: 9/	15 Report: 11/22	
2	FILER NAME	Garza, Delia			3 ACCOUNT# 00000009	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state Martinez, Ramiro	PAC (ID#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	06/14/2014	6 Contributor address; City, State; Z 10009 Childress Dr Austin, TX 78753-4333	Zip Code		\$100.00		
					<u> </u>	Texas, complete Schedule T)	
9	Principal occup	ation / Job title (See Instructions)		10 Employer (See In:	structions)		
	Date	Full name of contributor	PAC (ID#	()	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	06/28/2014	Contributor address; City; State; Z 133 Club Dr Luling, TX 78648-3503	Zip Code		\$150.00] 	
		•			(if traval outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)		Employer (See In:	<u> </u>	rexas, complete ochedate 1)	
	Date	Full name of contributor	PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	06/19/2014	Contributor address; City; State; Z 502 Arcadia Pl San Antonio, TX 78209-5923	Zip Code		\$250.00	1 	
					(If travel outside of	Texas, complete Schedule T)	
	Principal occup Jourdanton S	ation / Job title (See Instructions) tate Bank		Employer (See In Senior Vice Pre	structions)	<u> </u>	
	Date	Full name of contributor	PAC (ID#	<i>f</i>)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	06/29/2014	Contributor address; City; State; Z 2506 E 11th St Austin, TX 78702-3512	Zip Code		\$100.00	 	
	,	_			(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)		Employer (See In	structions)		
	Date	Full name of contributor	PAC (ID#	<u>#</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	06/27/2014	Contributor address; City; State; 2 8765 Stella Ct Stockton, CA 95210-2004	Zip Code		\$100.00	 	
					(If travel outside of	f Texas, complete Schedule T)	
	Principal occup	nation / Job title (See Instructions)		Employer (See In	structions)		
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	OTHER THAN FEEDGES ON LOANS						
	The Instruction	אס Guide explains how to complete this form.		1 PAGE # Schedule: 10	/15 Report: 12/22		
2	FILER NAME	Garza, Delia		3 ACCOUNT# 00000009	(Ethics Commission filers)		
4	Date	5 Full name of contributor ut-of-state PAC (ID# Mendenhall, Brad)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	06/03/2014	6 Contributor address; City; State; Zip Code 402 Dry Creek Rd Austin, TX 78737-4626		\$100.00			
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/30/2014	Contributor address; City; State; Zip Code 279 County Road 109 Uvalde, TX 78801-1221		\$100.00	 		
				L <u>` </u>	Texas, complete Schedule T)		
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/19/2014	Contributor address; City; State; Zip Code 3802 Quiver Dr San Antonio, TX 78238-3410		\$100.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/04/2014	Contributor address; City; State; Zip Code 2504 Berwyn Cir Austin, TX 78745-3559		\$100.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	pation / Job title (See Instructions)	Employer (See In		Total, compete concess ()		
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/29/2014	Contributor address; City; State; Zip Code 12800 Harrisglenn Dr Apt 433 Austin, TX 78753-5314		\$100.00	1 		
		7,000,00		(If travel outside of	Texas, complete Schedule T)		
 	Principal occur	pation / Job title (See Instructions)	Employer (See In	structions)			

The Instru	CTION GUIDE explains how to complete this form.		1 PAGE# Schedule: 11	/15 Report: 13/22
2 FILER NAM	E Garza, Delia	Garza, Delia		(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID# Ramirez, Andrew)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
06/30/201	6 Contributor address; City; State; Zip Code 10301 River Plantation Dr Austin, TX 78747-1130		\$350.00	
			1 '	Texas, complete Schedule T)
9 Principal od Rz Comm	cupation / Job title (See Instructions) unications	10 Employer (See In CEO	structions)	
Date	Full name of contributor	4)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/29/201	Contributor address; City; State; Zip Code 1112 W 9th St Austin, TX 78703-4926		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
	cupation / Job title (See Instructions) Reichle, Inc	Employer (See In Real Estate	structions)	
Date	Full name of contributor	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/28/201	4 Contributor address; City; State; Zip Code 6300 Rue Marielyne St Apt 1401		\$100.00	
	San Antonio, TX 78238-1651		(If travel outside of	Texas, complete Schedule T)
Principal oc	cupation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
05/30/201	Contributor address; City; State; Zip Code 2704 Arroyo Blanco Cv Austin, TX 78748-2800		\$100.00	
			<u> </u>	Texas, complete Schedule T)
Principal oc	cupation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/19/201	100 N Santa Rosa St Apt 729	. , , , , , , , , , , , , , , , , , , ,	\$100.00	
	San Antonio, TX 78207-3260		/If travel outside of	Texas, complete Schedule T)
Principal od	cupation / Job title (See Instructions)	Employer (See In	<u>J.`.</u>	TOXES, COMPLETE COMMUNICATION

	The Instruction	אס Guide explains how to complete this form.		1 PAGE # Schedule: 12	:/15 Report: 14/22	
2	FILER NAME	Garza, Delia		3 ACCOUNT# 00000009	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# San Antonio Professional Firefighters PAC)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	06/19/2014	6 Contributor address; City; State; Zip Code PO Box 5100 San Antonio, TX 78201-0100		\$350.00	 	
				<u>L_:</u>	Texas, complete Schedule T)	
9	Principal occup	eation / Job title (See Instructions)	10 Employer (See In	structions)		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	06/26/2014	Contributor address; City; State; Zip Code 1906 Ashprington Dr San Antonio, TX 78251-1300		\$200.00	! 	
					Texas, complete Schedule T)	
	Principal occup The Girls Sch	pation / Job title (See Instructions) nool of Austin	Employer (See In Admin Assistan	,		
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	06/06/2014	Contributor address; City; State; Zip Code 149 Tender Valley Cv Driftwood, TX 78619-4341		\$100.00	 	
				(If travel outside of	Texas, complete Schedule T)	
_	Principal occur	pation / Job title (See Instructions)	Employer (See In	<u> </u>	Toxas, complete concease 1,	
	. ,					
	Date	Full name of contributor	<u>'</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	06/06/2014	Contributor address; City; State; Zip Code 130 Cumberland Rd Austin, TX 78704-5491	· · · · · · · · · · · · · · · · · · ·	\$88.00	 	
					f Texas, complete Schedule T)	
	Principal occup	pation / Job title (See Instructions)	Employer (See In	estructions)		
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/12/2014	Contributor address; City; State; Zip Code 6628 Haswell Ln Austin, TX 78749-4110	· · · · · · · · · · · · · · · · · · ·	\$350.00	1 1	
				/If traval autoids ==	f Texas, complete Schedule T)	
<u></u>	Principal occup none	pation / Job title (See Instructions)	Employer (See In retired	<u> </u>	revas, complete soliedule ()	
_						

	The Instruction	GUIDE explains how to complete this form.		1 PAGE # Schedule: 13	/15 Report: 15/22	
2	FILER NAME	Garza, Delia	-	3 ACCOUNT# 00000009	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (II Stanley, Alfred	O#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	05/16/2014	6 Contributor address; City; State; Zip Code PO Box 5674 Austin, TX 78763-5674	; ;	\$100.00	 	
				(If travel outside of	Texas, complete Schedule T)	
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)		
-	Date	Full name of contributor	D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/15/2014	Contributor address; City; State; Zip Code 2702 Dupoint Cv	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$50.00	 	
		Austin, TX 78748-5154				
				<u> </u>	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor	D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	06/06/2014	Contributor address; City; State; Zip Code 2702 Dupoint Cv Austin, TX 78748-5154	;	\$50.00	1 	
					· · · · · · · · · · · · · · · · · · ·	
_	Principal occur	ation / Job title (See Instructions)	Employer (See In	<u> </u>	Texas, complete Schedule T)	
	т ппораг оссор	ation / 300 title (366 instructions)	Employer (See m	astructions)		
	Date	Full name of contributor	D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/14/2014	Contributor address; City; State; Zip Code 2653 Barton Hills Dr		\$100.00	 	
		Austin, TX 78704-4540			_	
			1 - 1 - 1	<u> </u>	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	istructions)		
	Date	Full name of contributor	D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/14/2014	Contributor address; City; State; Zip Code 306 Oak Knoll Dr San Antonio, TX 78228-2149	• • • • • • • • • • • • • • • • • • • •	\$100.00	 	
				(If travel outside of	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)			Employer (See In	structions)		

SCHEDULE A

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE#	445 Daniel 40/00	
2 FILER NAME	Garza, Delia		3 ACCOUNT # 00000009	/15 Report: 16/22 (Ethics Commission filers)	
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID≠ Voigt, Jonina	‡)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
05/13/2014	6 Contributor address; City; State; Zip Code 2700 Xenwood Ave S St Louis Park, MN 55416-1850		\$100.00	 	
			L <u>`</u>	Texas, complete Schedule T)	
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)		
Date	Full name of contributor	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
05/09/2014	Contributor address; City; State; Zip Code 13325 Kingman Dr Austin, TX 78729-4908		\$100.00	i 	
			(If travel outside of	Texas, complete Schedule T)	
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)		
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
06/02/2014	Contributor address; City; State; Zip Code 3107 Brightwood Dr Austin, TX 78746-6707		\$350.00	 	
			(If travel outside of	Texas, complete Schedule T)	
Principal occup Texas A & M	pation / Job title (See Instructions)	Employer (See In Professor	structions)		
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
06/03/2014	Contributor address; City; State; Zip Code 3107 Brightwood Dr Austin, TX 78746-6707		\$150.00	 	
			(If travel outside of	Texas, complete Schedule T)	
Principal occup	pation / Job title (See Instructions)	Employer (See In	estructions)		
Date	Full name of contributor	#)	Amount of	In-kind contribution	
	Williamson, Laura		contribution (\$)	description (if applicable)	
06/06/2014	Contributor address; City; State; Zip Code 12417 Audane Dr Austin, TX 78727-5762		\$75.00	 	
			(If travel outside of	Texas, complete Schedule T)	
Principal occu	Dation / Job title (See Instructions)	Employer (See In	 		

	OTTER THAIT LEDGES OR EGANG					
	The Instruction	אס Guide explains how to complete this form.		1 PAGE # Schedule: 15	/15 Report: 17/22	
2	2 FILER NAME Garza, Delia		3 ACCOUNT # 00000009	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Ybarra, Michelle	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	06/29/2014	6 Contributor address; City; State; Zip Code 8946 River Trce San Antonio, TX 78255-2380		\$100.00	 	
				(If travel outside of	Texas, complete Schedule T)	
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)		
	Date	Full name of contributor	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/14/2014	Contributor address; City; State; Zip Code 630 Kingfisher Creek Dr Austin, TX 78748-2427		\$100.00] 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occur	pation / Job title (See Instructions)	Employer (See In		Texas, complete concess 7,	
					!	

exas Ethics Commis	sion P.O.Box 12070 Aus	stin, Texas 78711-2070	(512)463-5800	TDD 1-800-735-298
LOANS				SCHEDULE E
The Instruction Gui	DE explains how to complete this fo	orm.	1 PAGE# Schedule: 1/1	Report: 18/22
2 FILER NAME G	arza, Delia		3 ACCOUNT# (E 00000009	ethics Commission filers)
TOTAL OF UN	TEMIZED LOANS:	\$\$\$\$		\$
5 Date of loan 04/24/2014	7 Name of lender Garza, Delia	out-of-state PAC (ID#)	9 Loan Amount (\$) \$25.00
6 Is lender a financial Institution?	209 Sandra	State; Zip Code		10 Interest rate
No	Austin, TX 78745			11 Maturity date 11/04/2014
12 Principal occupation	/ Job title (See Instructions)	13 Employer (See Instru	uctions)	
14 Description of Colla	leral	15 Check if personal fu	nds were deposited into	political account
16 GUARANTOR INFORMATION X not applicable	17 Name of guarantor 18 Guarantor address; City;	State; Zip Code		19 Amount Guaranteed (\$)
20 Principal Occupatio	n	21 Employer		
Date of loan 06/30/2014	Name of lender Garza, Delia	out-of-state PAC (ID#)	Loan Amount (\$) \$5,000.00
Is lender a financial Institution?	209 Sandra	State; Zip Code		Interest rate
No	Austin, TX 78745			Maturity date 11/04/2014
Principal occupation	/ Job title (See Instructions)	Employer (See Instr	uctions)	
Description of Colla	teral	Check if personal fu	nds were deposited into	political account
GUARANTOR INFORMATION X not applicable	Name of guarantor Guarantor address; City;	State; Zip Code		Amount Guaranteed (\$)
Principal Occupatio	<u> </u> n	Employer		

EXPENDITURE CATEGORIES

POLITICAL EXPENDITURES

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

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

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

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Fees	Printing Ex	pense Office Ove	erhead/Rental Expense	•	a category not listed above)
1 PAGE#	2	FILER NAME	•		3 ACCOUNT# (TEC filers
Schedule: 1/3 Re	-	Garza, Delia			00000009
4 Date	5 Payee name				
06/09/2014	Aaron Victor P	hotography			
6 Amount (\$)	7 Payee address	City; State; Zip Code			
\$150.00	802 Rolling Me	eadow Dr.,			
*******	Pflugerville, T	X 78660			
8 PURPOSE		ategories listed at the top of this schedule	' ''	•	of Texas, complete Schedule T)
OF	Consulting Exp	pense	photograph	У	
EXPENDITURE					
9 Complete ONLY if	Candidate / Offic	ceholder name	Office so	uaht:	Office held:
direct expenditure	Gandidato / Gilli	consider martie	011100 30	ogm.	omoo naa.
to benefit C/OH					
Date	Payee name				
06/10/2014	Ace Printing				
Amount (\$)	Payee address	City; State; Zip Code			
\$1,482.75	7807 Doncast				
	Austin, TX 78	745			
	0.1	Name of the Books of the State		///	
PURPOSE	Printing Exper	Categories listed at the top of this schedul	e) Description Printing	(II travel outside	e of Texas, complete Schedule T)
OF	Printing Exper	136	Finding		
EXPENDITURE					
Complete ONLY if	Candidate / Offi	ceholder name	Office so	ught:	Office held:
direct expenditure to benefit C/OH					
	l Barra area		· · · · · · · · · · · · · · · · · · ·		***************************************
Date 05/43/2044	Payee name American Prin	ting & Mailing			
05/13/2014 Amount (\$)	Payee address	City; State; Zip Code			
	1	• • • • •			
\$201.85	Austin, TX 78	754			
			•		
	Category (See (Categories listed at the top of this schedul	e) Description	(If travel outside	e of Texas, complete Schedule T)
PURPOSE	Printing Exper	-	Printing		•
OF EXPENDITURE					
		 			
Complete ONLY if direct expenditure	Candidate / Offi	ceholder name	Office so	ought:	Office held:
to benefit C/OH					
Date	Payee name				
06/03/2014	First Data Ser	vices			
Amount (\$)	Payee address	City; State; Zip Code			•
\$108.05	5565 Glenridg	e Connector NE			
1.55,00	Atlanta, GA 3	0342			
DUDDOSE		Categories listed at the top of this schedul	•		e of Texas, complete Schedule T)
PURPOSE OF	Accounting/Ba	inking	merchant a	ccount fees	
EXPENDITURE					
Complete ONLY if	Candidate / Offi	ceholder name	Office so	ught:	Office held:
direct expenditure	, Januaro i Oili				

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense Accounting/Banking Consulting Expense Event Expense

Texas Ethics Commission

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

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

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

Fees	Printing Expense Office Overhead/I The Instruction Guide explains hov		r a category not listed above)
1 PAGE#	2 FILER NAME		3 ACCOUNT# (TEC filers)
Schedule: 2/3 Re	I		00000009
4 Date	5 Payee name		
06/03/2014	First Data Services	+	
6 Amount (\$)	7 Payee address City; State; Zip Code		
\$8.56	5565 Glenridge Connector NE		
	Atlanta, GA 30342		
	(a) Cotogon (C. C. C	/h) Description //f hand and	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description (If travel outsident merchant account fees	e of Texas, complete Schedule T)
OF EXPENDITURE	, toodanting, banking	morenant account too	
EXPENDITORE			
9 Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH			
Date	Payee name	·	
06/03/2014	First Data Services		
Amount (\$)	Payee address City; State; Zip Code		
\$69.82	5565 Glenridge Connector NE		
·	Atlanta, GA 30342		
PURPOSE	Category (See Categories listed at the top of this schedule)	' '	e of Texas, complete Schedule T)
OF	Accounting/Banking	merchant account fees	
EXPENDITURE	,	1 '	
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH			
Date	Payee name		
06/13/2014	Graphic Granola		
Amount (\$)	Payee address City; State; Zip Code		
\$488.75			
\$100.70	Austin, TX 78751		
PURPOSE	Category (See Categories listed at the top of this schedule)	' '	e of Texas, complete Schedule T)
OF	Consulting Expense	Graphic design	
EXPENDITURE			
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure			
to benefit C/OH			
Date	Payee name Susan Harry Consulting, LLC		
05/08/2014 Amount (\$)	Payee address City; State; Zip Code		
\$575.00	Austin, TX 78703		
	Category (See Categories listed at the top of this schedule)	Description (If travel outsid	e of Texas, complete Schedule T)
PURPOSE OF	Consulting Expense	Compliance consulting	· _
EXPENDITURE			
	0 111 4 40% 4 33		
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought:	Office held:
to benefit C/OH			

POLITICAL EXPENDITURES

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

Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

Loan Repayment/Reimbursement

OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form. 3 ACCOUNT # (TEC filers) 1 PAGE# 2 FILER NAME Garza, Delia Schedule: 3/3 Report: 21/22 00000009 4 Date 5 Payee name 05/14/2014 Trudy's 6 Amount (\$) 7 Payee address City; State; Zip Code 901 Little Texas Lane \$273.52 Austin, TX 78745 8 (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 expenses OF EXPENDITURE 9 Complete ONLY if Office held: Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH Date Рауее пате 05/20/2014 Williams, Marisa Amount (\$) Payee address City; State; Zip Code 6509 Scenic Cove Austin, TX 78739 \$1,250.00 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Salaries/Wages/Contract Labor Salary OF **EXPENDITURE** Office held: Candidate / Officeholder name Office sought: Complete ONLY if direct expenditure to benefit C/OH Date Payee name 05/30/2014 Williams, Marisa Payee address Amount (\$) City; State; Zip Code 6509 Scenic Cove \$1,250.00 Austin, TX 78739 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Salaries/Wages/Contract Labor Salary OF **EXPENDITURE** Office sought: Office held: Complete ONLY if Candidate / Officeholder name direct expenditure to benefit C/OH

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES

Advertising Expense Accounting/Banking Consulting Expense Event Expense

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

Printing Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 PAGE# 2 FILER NAME 3 ACCOUNT # (TEC filers) Garza, Delia 00000009 Schedule: 1/1 Report: 22/22 4 Date 5 Payee name 04/10/2014 Graphic Granola 6 Amount (\$) Payee address City; State; Zip Code 1012 E. 38th 1/2 St. Austin, TX 78751 \$488.75 Reimbursement from political contributions intended (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Consulting Expense graphic design OF EXPENDITURE Date Payee name 04/30/2014 Postmaster Amount (\$) Payee address City; State; Zip Code 3903 S Congress Ave Austin, TX 78704 \$92.00 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Office Overhead/Rental Expense post office box rental **EXPENDITURE** Date Payee name Williams, Marisa 05/02/2014 Amount (\$) Payee address City; State; Zip Code 6509 Scenic Cove \$909.00 Austin, TX 78739 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Salaries/Wages/Contract Labor Salary OF EXPENDITURE