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August 18, 2014

VIA HAND DELIVERY

City of Austin Ethics Review Commission
c/o Cynthia “Cindy” Tom
Assistant City Attorney
Ethics & Compliance Team
Law Department, City of Austin
301 West 2nd Street, 4th Floor
Austin, Texas 78701

RE: Response to Susana Almanza to complaint filed by Stefan Wray

Dear Commission Members,

This law firm represents Susana Almanza in this matter. Attached is the sworn response by Susana Almanza to the complaint filed by Stefan Wray. Ms. Almanza quickly corrected the unintentional mistake on her campaign finance report, a mistake that several other candidates made as well. Ms. Almanza waives personal appearance at the preliminary hearing, and asks the Commission to consider this submission on her behalf.

Please let me know if we can be of further assistance in this matter.

Respectfully submitted,



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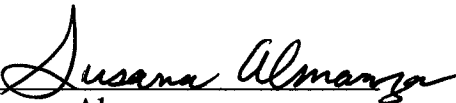
Cc: James Cousar, Counsel to the Commission
Stefan Wray, Complainant

AFFIDAVIT OF SUSANA ALMANZA

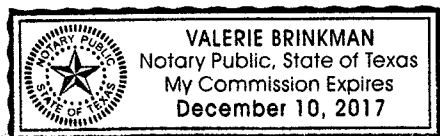
Before me, the undersigned notary, on this day personally appeared Susana Almanza, the affiant, a person whose identity is known to me. After I administered an oath to affiant, affiant testified:


1. "My name is Susana Almanza. I am over 18 years of age, of sound mind, and capable of making this affidavit. The facts stated in this affidavit are within my personal knowledge and are true and correct.
2. By an email notice from the City Clerk's Office on the afternoon of August 13, 2014, I became aware of a complaint filed against me regarding campaign finance reporting for my campaign for Austin City Council District 3. On my campaign finance report (March 31, 2014 thru June 30, 2014), I made an unintentional error in not reporting the occupation and employer name of certain contributors to my campaign.
3. On the morning of August 15, 2014, I filed a corrected report providing the unintentionally omitted information about the contributors. (See Attached)
4. I did not intentionally make this error. The City's instructions to the candidates implied that the candidates should review the Texas Election Code provision regarding such reports or occupation and employer, but that statute does not apply to these candidates for Austin City Council. My campaign manager and I were left with the impression that the occupation/employer reporting was not required. I did not ask an attorney about whether there was a requirement elsewhere in City Code requiring the reporting. However, I did ask former Mayor Gus Garcia whether the contributors' occupation and employer name had to be reported, and he told me it did not. Apparently, the reporting requirement became effective since Mayor Garcia last ran for office, but, regardless, I did not intentionally make this mistake.
5. When I became aware of the issue, I also checked other City Council campaign finance reports and noted that candidates in Districts 1, 2, 8, 9, and 10 made the same mistake. I ask that the Ethics Commission find that my mistake was unintentional and that my quick correction of the error be recognized.

Further affiant sayeth not.


Susana Almanza

Sworn to and subscribed before me by Susana Almanza on August 18, 2014.




Notary Public in and for the State of Texas
My commission expires: 12/10/2017

FORM COR-C/OH

CORRECTION/AMENDMENT AFFIDAVIT
FOR CANDIDATE/OFFICEHOLDER

1 ACCOUNT # 00078741		2 Total pages filed: 8		OFFICE USE ONLY	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	Date Received	
	NICKNAME	LAST	SUFFIX	Date Hand-delivered or Postmarked	
4 ORIGINAL REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other (specify)	Receipt #	
	<input checked="" type="checkbox"/> July 15	<input type="checkbox"/> Exceeded \$500 limit		Amount	
	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> 15th day after treasurer appointment (officeholder only)		Date Processed	
	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Final report		Date Imaged	
5 ORIGINAL PERIOD COVERED		Month Day Year		Month Day Year	
		3 / 31 / 2014 THROUGH		06 / 30 / 2014	

6 EXPLANATION OF CORRECTION

Occupation and name of Employer for Contributors donating \$200 and above was not included in July 15th Report. Correction is attached.

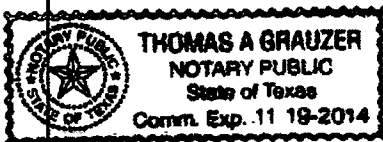
7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check ONLY if applicable:

☐ **Semiannual reports:** This report is an amendment/correction to a semiannual report due on or after September 1, 2011. If amendment/correction is filed on or after the eighth day after the original report was filed, I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

☐ **Other reports (excluding semiannual reports due on or after September 1, 2011):** I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.



AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Susana Almanza, this the 15th day of August

20 14th to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

**Remember To Attach Any Part Of The Campaign Finance Report Form
Needed To Report And Explain Corrections**

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS****FORM C/OH
COVER SHEET PG 2****13 C/OH NAME** Almanza, Susana (Ms.)**14 ACCOUNT #** (Ethics Commission filers)
00078741**15 NOTICE
FROM
POLITICAL
COMMITTEE(S)**

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

COMMITTEE TYPE**COMMITTEE NAME**☐ **GENERAL****COMMITTEE ADDRESS**☐ **SPECIFIC****COMMITTEE CAMPAIGN TREASURER NAME**☐ additional pages**COMMITTEE CAMPAIGN TREASURER ADDRESS****16 CONTRIBUTION
TOTALS**1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN
PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 0.00

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 6,600.00

**EXPENDITURE
TOTALS**

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$ 0.00

4. TOTAL POLITICAL EXPENDITURES

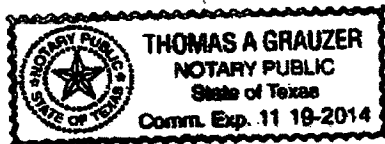
\$ 0.00

**CONTRIBUTION
BALANCE**5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$ 0.00

**OUTSTANDING
LOAN TOTALS**6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
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.

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Susana Almanza, this the 15th day of August, 20 14, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Thomas A. Grauzer
Print name of officer administering oath

notary public
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 1/5 Report: 3/7	
2 FILER NAME Almanza, Susana (Ms.)				3 ACCOUNT # (Ethics Commission filers) 00078741	
4 Date 05/08/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brooks, Joelia (Ms.)		7 Amount of contribution (\$) \$250.00		8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 1900 Rinor Hills Ct Pflugerville, TX 78660		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
9 Principal occupation / Job title (See Instructions) Operations Manger			10 Employer (See Instructions) Southwest Key		
Date 05/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brown, Christopher T. (Mr.)		Amount of contribution (\$) \$350.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 5013 Red Bluff Austin, TX 78702		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions) Attorney			Employer (See Instructions) Self		
Date 05/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Calderon, Ernesto (Mr.)		Amount of contribution (\$) \$300.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 7309 Shadywood Austin, TX 78745		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions) Retired			Employer (See Instructions) Retired		
Date 05/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chung, Melody (Ms.)		Amount of contribution (\$) \$250.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 10108 Spicewood Mesa Austin, TX 78759		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions) Accountant			Employer (See Instructions) Southwest Key		
Date 05/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chung, Vicente (Mr.)		Amount of contribution (\$) \$250.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 10108 Spicewood Mesa Austin, TX 78759		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions) Engineer			Employer (See Instructions) IBM		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/5 Report: 4/7	
2 FILER NAME Almanza, Susana (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00078741	
4 Date 05/08/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Delgado Savage, Veronica (Ms.) 6 Contributor address; City; State; Zip Code 2929 Lagerway Austin, TX 78748	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) VP Youth Justice		10 Employer (See Instructions) Southwest Key	
Date 05/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fiveash, Peggy (Ms.) Contributor address; City; State; Zip Code 700 N. 3rd St. Ballinger, TX 76821	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self	
Date 06/27/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ginsberg, Michael (Mr.) Contributor address; City; State; Zip Code 917 W. Lynn St. Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) GM Law Firm	
Date 05/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gonzalez, Edna (Dr.) Contributor address; City; State; Zip Code 201 E. Yellowhammer Ave. McAllen, TX 78504	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 06/07/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mendez, Rodolfo (Mr.) Contributor address; City; State; Zip Code 3111 Garwood Austin, TX 78702	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Ballet East	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/5 Report: 5/7	
2 FILER NAME Almanza, Susana (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00078741	
4 Date 06/27/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Michel, Lorri (Ms.) 6 Contributor address; City; State; Zip Code 917 W. Lynn St. Austin, TX 78703	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Attorney		10 Employer (See Instructions) Self	
Date 05/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moses, Russell G. (Mr.) Contributor address; City; State; Zip Code 1401 E. Rundberg Lane #76 Austin, TX 78763	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Austin Comm. College	
Date 06/07/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ramirez, Jill Christine (Ms.) Contributor address; City; State; Zip Code 5309 Presido Rd. Austin, TX 78745	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Program Director		Employer (See Instructions) Latino Health Care Forum	
Date 06/28/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rodgers, Brian (Mr.) Contributor address; City; State; Zip Code 1112 W. 9th St. Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Real Estate Investor		Employer (See Instructions) Self	
Date 05/14/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rodriguez, Alexia (Ms.) Contributor address; City; State; Zip Code 2405 Rock Terrace Circle Austin, TX 78704	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) VP Immigrant Youth Services		Employer (See Instructions) Southwest Keys	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 4/5 Report: 6/7	
2 FILER NAME Almanza, Susana (Ms.)				3 ACCOUNT # (Ethics Commission filers) 00078741	
4 Date 06/30/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rodriguez, Frank (Mr.)		7 Amount of contribution (\$) \$350.00		8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code PO Box 1271 Austin, TX 78767		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
9 Principal occupation / Job title (See Instructions) President			10 Employer (See Instructions) Latino Helath Care Forum		
Date 05/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Romo, Ezekiel (Mr.)		Amount of contribution (\$) \$350.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 7209 Blessing Dr. Austin, TX 78752		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions) Operations Officer			Employer (See Instructions) SER Jobs for Progress		
Date 05/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sanchez, Jennifer (Ms.)		Amount of contribution (\$) \$250.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 6105 Highlandale Dr. Austin, TX 78731		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions) VP Community Engagement			Employer (See Instructions) Southwest Key		
Date 05/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sanchez, Juan (Mr.)		Amount of contribution (\$) \$250.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 6105 Highlandale Dr. Austin, TX 78731		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions) President			Employer (See Instructions) Southwest Key		
Date 05/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Santis, Rosa (Ms.)		Amount of contribution (\$) \$300.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2311 Enfield Rd. Austin, TX 78703		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions) Owner			Employer (See Instructions) Pedro SS Services Inc.		

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/5 Report: 7/7	
2 FILER NAME Almanza, Susana (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00078741	
4 Date 05/14/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sheppard, Peggy (Ms.) 6 Contributor address; City; State; Zip Code 465 W. 14th St. New York, NY 10031	7 Amount of contribution (\$) \$200.00 8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Director		10 Employer (See Instructions) WE ACT	
Date 06/28/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Spitz, Robert (Mr.) Contributor address; City; State; Zip Code 3211 E. Cesar Chavez Austin, TX 78702	Amount of contribution (\$) \$350.00 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Veterinarian		Employer (See Instructions) Self	
Date 06/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Susan Roth Consulting LLC Contributor address; City; State; Zip Code 4111 Tablerock Dr. Austin, TX 78731	Amount of contribution (\$) \$350.00 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Self	