CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

Texas Ethics Commission

FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guil	DE explains how to complete this	form.	ACCOUNT # Ethics Commission filers) 41966827	2 PAGE # 1 of 8		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST Monic NICKNAME LAST Guzm	т :a 	MI SUFFIX	OFFICE U	AUSTIN CIT RECEI	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX: APT / SUITE #. 605 Masterson Pass Apt 835 Austin, TX 78753	: CITY,	STATE; ZIP CODE	Date Hand-delivere	Amount	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST Monic NICKNAME LAST Guzm	:a 	MI SUFFIX	Date Imaged		
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	street address (NO PO BOX PLEASE 605 Masterson Pass Apt 839 Austin, TX 78753		CITY; STATE;	ZIP CODE		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMB (512) 585-5832	BER	EXTENSION			
8 REPORT TYPE		day before election ay before election	Runoff Exceeded \$500 limit	appointment (d	campaign treasurer officeholder only) ttach C/OH - FR)	
9 PERIOD COVERED	Month Day Year 07/01/2014	THROUGH	Month Da 09/25/2		表 ^含	
10 ELECTION	ELECTION DATE Month Day Year 11/04/2014	ELECTION TYPE Primary	Runoff	 General	Special	
11 OFFICE	OFFICE HELD (if any) City Council District 4	-	12 OFFICE SOUGHT (if kno	wn)		
GO TO PAGE 2						

CANDIDATE / OFFICEHOLDER REPORT: SUBBORT & TOTALS

FORM C/OH COVER SHEET BO 2

SUFFORT	IOIALS		COVER	Oneel PG Z	
13 C/OH NAME Guzn	nan, Monica		14 ACCOUNT # (E 41966827	thics Commission filers)	
15 NOTICE FROM	This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report the information only if they receive notice of such expenditures				
POLITICAL COMMITTEE(S)	COMMITTEE TYPE	PE COMMITTEE NAME			
	GENERAL	COMMITTEE ADDRESS			
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		_	
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS			
		<u> </u>			
16 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00	
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	300.00	
EXPENDITURE 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED TOTALS			\$	0.00	
	4. TOTAL	POLITICAL EXPENDITURES	\$	965.15	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			0.00	
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD			20.00	
17 AFFIDAVIT			·		
ANN MARGRETT FRANKLIN MY COMMISSION EXPIRES October 17, 2014 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 S	STAMP / SEAL ABOV	/E			
Sworn to and subscrib		he said MON: CO GUZMON rtify which, witness my hand and seal of office.	, this the	letu day	
Signature of officer adm	Xett 3 Acard	2 Am Norgraft Franklin Print name of officer administering path	Notars Title of officer admini	stering oath	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.			1 PAGE# Schedule: 1/2	P. Report: 3/8			
2	FILER NAME	Guzman, Monica		3 ACCOUNT # 41966827	(Ethics Commission filers)		
4	Date	Full name of contributor		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	09/23/2014	6 Contributor address; City; State; Zip Code 1201 Laurelleaf Dr Pflugerville, TX 78660		\$25.00	 		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Retired	ation / Job title (See Instructions)	10 Employer (See In	structions)			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	07/25/2014	Contributor address; City; State; Zip Code 1411 Gracy Farms Ln Apt 23 Austin, TX 78758		\$20.00	 		
		·		L.`	Texas, complete Schedule T)		
	Principal occup Executive Dir	ation / Job title (See Instructions) ector	Employer (See In: TexasROSE	structions)			
	Date	Full name of contributor	·)	Amount of cantribution (\$)	In-kind contribution description (if applicable)		
	07/15/2014	Contributor address; City; State; Zip Code 11310 Spicewood Club Dr Apt 2 Austin, TX 78750		\$30.00	† 		
				(If travel outside of	Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions) Employer (Retired		Employer (See In	structions)				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	08/31/2014	2014 Contributor address; City; State; Zip Code 3207 Benbrook Dr Austin, TX 78757		\$50.00	 		
				(If travel outside of	Texas, complete Schedule T)		
		ation / Job title (See Instructions) ector of Research and Evaluation	Employer (See In: Hogg Foundation				
-	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	07/19/2014	Contributor address; City; State; Zip Code 5309 Presidio Rd Austin, TX 78745		\$50.00			
				(If travel outside of	Texas, complete Schedule T)		
	Principal occurs	ation / Job title (See Instructions)	Employer (See In	<u> </u>	reses, complete schedule 1)		
Program Services Director Latino Hea							

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction	ON GUIDE explains how to complete this form.	1 PAGE# Schedule: 2/2 Report: 4/8				
2 FILER NAME	Guzman, Monica		3 ACCOUNT # 41966827	(Ethics Commission filers)		
4 Date	5 Full name of contributor ut-of-state PAC (ID: Rivera, Gilbert	¥)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
07/20/2014	6 Contributor address; City; State; Zip Code 1000 Glen Oaks Ct Austin, TX 78702	City; State; Zip Code		† 		
			(If travel outside of	Texas, complete Schedule T)		
9 Principal occup Retired	pation / Job title (See Instructions)	10 Employer (See In	structions)			
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
08/04/2014	Contributor address; City; State; Zip Code 1806 Westmore Dr		\$50.00	 		
	Austin, TX 78723		(If travel outside of	Texas, complete Schedule T)		
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)			
Retired	,	. , ,				
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
08/11/2014	Contributor address; City; State; Zip Code 1806 Westmore Dr Austin, TX 78723		\$50.00	t { f		
			(If travel outside of	Texas, complete Schedule T)		
Principal occup Retired	pation / Job title (See Instructions)	Employer (See In	structions)			

Texas Ethics Commission P.O.Box 12070 Austin, Texas 7871	11-2070 (512)463-5800 TDD 1-800-735-298
LOANS	SCHEDULE E
The Instruction Guide explains how to complete this form. 2 FILER NAME Guzman, Monica	1 PAGE # Schedule: 1/1 Report: 5/8 3 ACCOUNT # (Ethics Commission filers)
4 TOTAL OF UNITEMIZED LOANS: ⇔⇔⇔⇔	41966827
5 Date of loan 7 Name of lender	9 Loan Amount (\$) \$20.00
6 Is lender a financial Institution? 8 Lender address; City; State; Zip Code 605 Masterson Pass Apt 835 Austin, TX 78753	
No	11 Maturity date
	eck if personal funds were deposited into political account
16 GUARANTOR INFORMATION 18 Guarantor address; City; State; Zip Code □ not applicable	19 Amount Guaranteed (\$)
20 Principal Occupation 21 Emp	ployer

EXPENDITURE CATEGORIES

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

Advertising Expense Accounting/Banking Consulting Expense Event Expense

OF EXPENDITURE

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

P.O.Box 12070

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)

Printing Expense The Instruction Guide explains how to complete this form. 3 ACCOUNT # (TEC filers) 2 FILER NAME 1 PAGE# Guzman, Monica 41966827 Schedule: 1/2 Report: 6/8 5 Payee name 4 Date 2014 RTCC Workshop 07/09/2014 Payee address 6 Amount (\$) City; State; Zip Code PO Box 1088 \$26.00 Austin, TX 78767-1088 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** Event Expense Regional Transit Coordination Cmty OF EXPENDITURE Date Payee name Allied Printing 07/25/2014 Amount (\$) Payee address City; State; Zip Code 8222 N Lamar Blvd Austin, TX 78753 \$399.44 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** Advertising Expense Campaign push cards OF **EXPENDITURE** Date Payee name 07/15/2014 **PostNet** Amount (\$) Payee address City; State; Zip Code 3571 Far West Blvd \$6.00 Austin, TX 78731 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description PURPOSE **Legal Services** Notary public (campaign fin rpt) OF EXPENDITURE Date Payee name **PostNet** 07/16/2014 Payee address City; State; Zip Code Amount (\$) 3571 Far West Blvd \$6.00 Austin, TX 78731 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** Legal Services Notary public (campaign fin rpt)

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 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) Fees The Instruction Guide explains how to complete this form. 1 PAGE# FILER NAME 3 ACCOUNT # (TEC filers) Guzman, Monica Schedule: 2/2 Report: 7/8 41966827 5 Payee name 4 Date 07/21/2014 PostNet 6 Amount (\$) Payee address City: State: Zip Code 3571 Far West Blvd Austin, TX 78731 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** Legal Services Notary public (campaign fin rpt) **EXPENDITURE** Date Payee name 08/04/2014 Texas Democratic Party City; State; Zip Code Amount (\$) Payee address 4818 E Ben White Blvd Ste 104 \$225.00 Austin, TX 78741 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** VAN access OF **EXPENDITURE** Date Рауее пате 07/07/2014 Worley's Printing Amount (\$) Payee address City; State; Zip Code 3217 N IH 35 Frontage Rd \$25.00 Austin, TX 78722 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 Advertising Expense Badge **EXPENDITURE** Date Payee name 07/11/2014 Worley's Printing Payee address Amount (\$) City; State: Zip Code 3217 N IH 35 Frontage Rd \$271.71 Austin, TX 78722 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** Advertising Expense Campaign business cards **EXPENDITURE**

Austin, Texas 78711-2070

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE !

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

EXPENDITURE CATEGORIES 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 ho	w to complete this form.	
		2 FILER NAME		3 ACCOUNT # (TEC filers)
				41966827
4 Date	5 Payee name HEB			
07/27/2014 6 Amount (\$)	7 Payee addres	s City; State; Zip Code		
\$15.99				
Ψ 10.99	Austin, TX 7			
8 PURPOSE		e Categories listed at the top of this schedule)		egarding type of information required.)
OF	Food/Bevera	ige Expense	bagged ice/bottled water	
EXPENDITURE				
Date	Payee name		•	
07/20/2014	PayPal			
Amount (\$)	Payee addres	s City; State; Zip Code		
\$0.88	2211 N 1st S	St		
	San Jose; C	CA 95131		
	Category /Sa	a Catagoriae lielad at the tax of this echadula.	Description (See instructions of	egarding type of information required.)
PURPOSE	Fees	e Categories listed at the top of this schedule)	Processing fee	garonig type or information required.)
OF EXPENDITURE			1 /2222	
EXI ENDITORE				
Date	Payee name			
09/23/2014	Wang, Zhilin			
Amount (\$)	Payee addres	•		
\$30.00	1709 Hackne Austin, TX 7	ey Cv 18727		
		· · ·		
le s 11 - 1	Category (See	e Categories listed at the top of this schedule)	Description (See instructions re	egarding type of information required.)
PURPOSE OF	OTHER - Of		Canon printer cartridges	
EXPENDITURE				
<u> </u>	<u> </u>			
!				