

TO: Karen Kennard, City Attorney

Austin Kaplan, Ethics Commission

Gregorio Casar Lance Pettus

FROM: Jannette Goodall, City Clerk

DATE: October 14, 2014

SUBJECT: Sworn Complaint

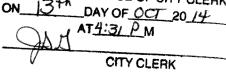
The attached sworn complaint was received on October 13, 2014 in the Office of the City Clerk. It was filed by Lance Pettus against Gregorio Casar.

Per City Code, Chapter 2-7-41(D), this letter serves as the Office of the City Clerk's acknowledgement that the complaint was received and as notice to all those named above, as required in the code.

Attachment

## FILED IN THE OFFICE OF CITY CLERK ON 13<sup>th</sup> DAY OF OCT 20 14

# ETHICS REVIEW COMMISSION CHAPTER 2-7 CITY CODE COMPLAINT



NAME OF PERSON(S) FILING COMPLAINT:Lance R. Pettus
MAILING ADDRESS: 9010 Quail Creek Dr. Austin, TX 78758
PHONE NUMBER: 512-633-4105
EMAIL ADDRESS: lance.pettus@yahoo.com
PLEASE FILE A SEPARATE COMPLAINT FORM FOR EACH PERSON COMPLAINED AGAINST.
NAME OF PERSON COMPLAINED AGAINST: Gregorio 'Greg' Casar
CITY OFFICE, DEPARTMENT, COMMISSION: Candidate for Austin City Council District 4
MAILING ADDRESS: P.O. Box 180941, Austin, TX 78718
PHONE NUMBER [IF KNOWN]:_ <u>Not known</u>
EMAIL ADDRESS [IF KNOWN]:_ <u>Not known</u>

The Ethics Review Commission has jurisdiction to hear complaints alleging violation(s) of the following provisions:

- City Code, Chapter 2-1, Section 2-1-24 (City Boards, Conflict of Interest and Recusal)
- City Code, Chapter 2-2 (Campaign Finance)
- City Code, Chapter 2-7 (Ethics and Financial Disclosure), except for Article 6 (Antilobbying and Procurement)
- City Code, Chapter 4-8 (Regulation of Lobbyists)
- City Charter, Article III, Section 8 (Limits on Campaign Contributions and Expenditures)

PLEASE LIST EACH ALLEGED VIOLATION OF THE ABOVE CITY CODE AND CHARTER PROVISIONS SEPARATELY ON THE FOLLOWING PAGES.

SECTION OF CHARTER OR ORDINANCE VIOLATED: 2-2-22 - FUNDRAISING AND BUNDLING BY INTERMEDIARIES

DATE OF ALLEGED VIOLATION: <u>Activities Sept. 5th - Sept. 19th, 2014, reflected on Candidate's '30 Day Out' filing and Schedule ATX5 filing on Oct. 6, 2014.</u>

## ACTIONS ALLEGED TO BE A VIOLATION:

Candidate Casar did not file a Schedule ATX 5 form to disclose effective bundling for donations totaling \$5.950.00 from employees and spouses of Force Multiplier Solutions, Inc., a purveyor of security systems for school buses. Regardless of whether the bundler delivered the donations to the candidate as one; the solicitation, obtaining and dollar amount effectively meet the definition of bundling under § 2-2-22, and Candidate Casar should have errored on the side of full disclosure and transparency by informing the source of the funds and by filing Schedule ATX 5 on the bundled donations from Force Multiplier Solutions, Inc. employees and spouses.

WITNESSES OR EVIDENCE THAT WOULD BE PRESENTED:\_\_\_\_\_

Evidence pulled from Candidate Casar's incomplete filing of Oct. 6, 2014 provided at <a href="http://www.austintexas.gov/edims/document.cfm?id=218754">http://www.austintexas.gov/edims/document.cfm?id=218754</a>

Complete summary of that data with regard to individuals associated with Force Multiplier Solutions, Inc. and their spouses:

Date	Amt.	First	Last	City	Stat	e Zip	Occup/Emp
9/16/14	350.00	Jessica	Parke	Gretna	LA	70056	
9/19/14	350.00	Matthew	Farmer	Kenner	LA	70065	
9/12/14	350.00	Heather	LeBlanc	Marrero	LA	70072	Brannent of ee treatipher boldtions me.
9/11/14	350.00	Kathryn	Swartwood	New Orleans	LA	70115	Homemaker
9/11/14	350.00	Slater	Swartwood	New Orleans	LA	70115	EVP/Force Multiplier Solutions, Inc.
9/19/14	350.00	Donald	Johnson	New Orleans	LA	70118	Accountant/Leon Lowe and Sons
9/19/14	350.00	Aleksandar	Zoranic	New Orleans	LA		R & D/Force Multiplier Solutions, Inc.
9/11/14	350.00	Elizabeth	Michener	New Orleans	LA		Executive Asst./Force Multiplier Solutions Inc.
9/11/14	350.00	Patrick	Michener	New Orleans	LA	70124	Manager/Hertz
9/10/14	350.00	Helene	Ponder	New Orleans	LA	70124	Marketing Manager/Imperial Trading Co.
9/10/14	350.00	Michael	Ponder	New Orleans	LA	70124	Regional Manager/Force Multiplier Solutions
9/15/14	350.00	Stefan	Meyer	Mandeville	LA	70448	Software & Hardware Admin/Force

0.00		4521					Multiplier	
9/5/14	350.00	Chris	Kerr	Garland	TX	75043	COO/Force Multiplier Solutions Inc.	
9/5/14	350.00	Heather	Kerr	Garland	TX	75043	Homemaker	
9/11/14	350.00	Linda	Leonard	Dallas	TX	75230	Homemaker	
9/11/14	350.00	Robert	Leonard	Dallas	TX		Chairman and CEO/Force Multiplier Solutions Inc.	
9/18/14	350.00	Brittany	Seeber	Dallas	TX	75287	Executive Asst./Force Multiplier Solutions Inc.	
Total	5,950.00							

Information on Force Multiplier Solutions,

Inc. https://www.linkedin.com/company/force-multiplier-solutions-llc

II.

SECTION OF CHARTER OR ORDINANCE VIOLATED: 2-2-3 - CONFORMITY WITH TEXAS ELECTION CODE. and § 2-2-5 - OFFENSES AND PENALTY.

DATE OF ALLEGED VIOLATION: <u>Oct. 6, 2014, contained in Candidate Casar's '30 Day Out' filing regarding a donation dated 9/25/14.</u>

#### ACTIONS ALLEGED TO BE A VIOLATION:

\_Candidate Casar did not disclose the Occupation nor Employer of a John Kirk Mitchell who contributed the maximum \$350.00 on 9/25/14 as required on the form 'Political Contributions Schedule A', required under Title 15, Election Code and requirement reaffirmed by City Ordinances § 2-2-3 - CONFORMITY WITH TEXAS ELECTION CODE. and § 2-2-5 - OFFENSES AND PENALTY. Further, Candidate Casar willfully took responsibility for the infraction by signing the 'Form C/OH' in affirmation to the following: "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," and further required under § 2-2-3 - CONFORMITY WITH TEXAS ELECTION CODE, penalties to be meted out under § 2-2-5 - OFFENSES AND PENALTY.

WITNESSES OR EVIDENCE THAT WOULD BE PRESENTED:

\_\_\_\_\_Evidence pulled from Candidate Casar's incomplete filing of Oct. 6, 2014 provided at <a href="http://www.austintexas.gov/edims/document.cfm?id=218754">http://www.austintexas.gov/edims/document.cfm?id=218754</a>

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9/25/14 350.00 John Kirk

Mitchell Austin

TX 78765 \* Occupation / Employer undisclosed \*

III.

SECTION OF CHARTER OR ORDINANCE VIOLATED:\_\_\_\_\_

[IF MORE ROOM IS NECESSARY, PLEASE CONTINUE ON A BLANK PAGE USING THE SAME FORMAT ALL THE STATEMENTS AND INFORMATION IN THIS COMPLAINT ARE TRUE AND FACTUAL TO THE BEST OF MY KNOWLEDGE. DATE: \_\_10/13/2014 COMPLAIMANT'S SIGNATURE Lance Pettus PRINT NAME STATE OF TEXAS **COUNTY OF TRAVIS** This instrument was acknowledged, sworn to and subscribed before me by Lance Pettus On the 13th day of October, 2014, to certify which witness my hand and official seal. Notary Public in and for the State of Texas ANNETTE SUE GOODALL My Commission Expires July 02, 2016 Jannette Sue Goodael Typed or Printed Name of Notary

THIS FORM MUST BE SUBMITTED TO THE OFFICE OF THE CITY CLERK.

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	Contrib. + ######	350.00	Randy	Langford	Austin	×	78701	Attorney/The Langford Firm PLLC
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	Contrib. + ######	350.00	Heather	LeBlanc	Marrero	A	70072	Svc. Coordinator/Force Multiplier Solutic
	Contrib. + ######	350.00	Linda	Leonard	Dallas	X	75230	Homemaker
	Contrib. + ######	350.00	Robert	Leonard	Dallas	X	75230	Chairman and CEO/Force Multiplier Sol
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	Contrib. + ######	350.00	Adam	Loewy	Austin	X	78701	Lawyer/Loewy Law Firm
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	Contrib. + ######	350.00	Elizabeth	Michener	New Orleans	A	70124	Executive Asst./Force Multiplier Solution
	Contrib. + ######	350.00	Patrick	Michener	New Orleans	A	70124	Manager/Hertz
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	Contrib. + ######	350.00	Kevin	Morales	Round Rock	×	78664	Real Estate/Gene Johnson Realtor, Inc.
	Contrib. + ######	350.00	Tina	Morales	Round Rock	×	78664	Branch Manager/1st Convenience Bank
		300.00	Chaka	Mpeanaji	Austin	X	78721	Musician/self
	+	100.00	Sarah	Neve	Austin	X	78704	Blank
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Vela	Varghese	Valera	Umphress	Tucker	Thomas	^`	Tekle	Tanksley	Tanksley	Swartwood	Swartwood	Sutton	Staudt	Stanley	Squires	J	Siyum	Siff	Sheppard	Seifu	Seeber	Schnier	Schneider	Rotkoff	Rotkoff	Roth	Roadman	Reynolds	Ramsey	Ramos	Quinzi	Quinzi	Purgason	Purgason	Ponder	Ponder	Pierce
Austin	Austin	Austin	Austin	Austin	Cambridge	Austin	Round Rock	Round Rock	Round Rock	New Orleans	New Orleans	Round Rock	El Paso	Austin	The Plains	Marion	Pflugerville	Austin	Austin	Austin	Dallas	Austin	Austin	Austin	Austin	Austin	Austin	Blank	Austin	Austin	Austin	Austin	Austin	Austin	New Orleans	New Orleans	Austin
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Frankel	Frankel	Frankel																					Candelas	Zoranic	Zeleke	Young	Yosief	Yildirim	Yedeme	Yancy	Yancy	Wolf	Woldegebriel	Williams		Wallace	Vora
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	ANDIDATE :	FORM C/OH COVER SHEET PG 1			
TI	ne C/OH Instruction Gui	DE explains how to complete this form.	1 ACCOUNT # (Ethics Commission filers) 00000010	2 PAGE # 1 of 58	
3	CANDIDATE / OFFICEHOLDER	MS/MRS/MR FIRST Gregorio	MI	OFFICE USE ONLY	
	NAME	NICKNAME LAST Casar	SUFFIX	AUSTIN REC	
4	CANDIDATE / OFFICEHOLDER MAILING ADDRESS	P.O. Box 180941 Austin, TX 78718	CITY; STATE; ZIP CODE	Date Hand-delivered or Date Postmirked	
	Change of Address			RK 34	
				Receipt # Amount	
5	CAMPAIGN TREASURER	MS/MRS/MR FIRST	MI	Date Processed	
	NAME	Teofilo		Date Imaged	
		Teo Tijerina	SUFFIX		
6	CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SU  1201 Tinnin Ford Austin, TX 78741	ITE#; CITY: STATE;	ZIP CODE	
7	CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (512) 964-2843	EXTENSION		
8	REPORT TYPE	January 15 X 30th day before elec	tion Runoff	15th day after campaign treasurer appointment (officeholder only)	
	·	July 15 8th day before elect	on Exceeded \$500 limit	Final report (Attach C/OH - FR)	
9	PERIOD COVERED	Month Day Year	Month Day	Year	
		07/01/2014	и <b>с</b> н 09/25/201	4	
10	ELECTION	Month Day Year Primar 11/04/2014		General Special	
11	OFFICE	OFFICE HELD (if any)	12 OFFICE SOUGHT (if known) City Council District 4		
	GO TO PAGE 2				

# **CANDIDATE / OFFICEHOLDER REPORT:** SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

				CHEEF FG Z
13 C/OH NAME Casa	r, Gregorio		14 ACCOUNT # 00000010	(Ethics Commission filers)
15 NOTICE FROM	nave been made with	olice of political expenditures by political committees to support the conout the candidate's or officeholder's knowledge or consent. Candidatey receive notice of such expenditures	andidate / officeholder ites and officeholders	. These expenditures may are required to report this
POLITICAL COMMITTEE(S)				
	GENERAL	COMMITTEE ADDRESS		
SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME				
additional pages	COMMITTEE CAMPAIGN TREASURER ADDRESS			
16 CONTRIBUTION TOTALS				
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	43,513.20
EXPENDITURE TOTALS				619.26
	4. TOTAL I	POLITICAL EXPENDITURES	\$	30,617.30
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$			43,924.53
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LY OF THE REPORTING PERIOD	\$	5,025.00
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  SUSAN C. HARRY Notary Public. State of Texas My Commission Expires May 16, 2015  AFFIX NOTARY STAMP / SEAL ABOVE				
Sworn to and subscribed before me, by the said				
Signature of officer admin	A istering oath	Susan Harn Print name of officer administering oath	The of officer adm	otto

POLIT	ICAL CONTRIBUTIONS R THAN PLEDGES OR LOA	NS		SCHEDULE A
The Instruct	rion Guide explains how to complete this form.		1 PAGE#	21.2
2 FILER NAME	Casar, Gregorio		3 ACCOUNT # 00000010	34 Report: 3/58 (Ethics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID: Aaker, Linda	#)	7 Amount of contribution (\$)	8 tn-kind contribution description (if applicable)
07/11/2014	6 Contributor address; City; Slate; Zip Code 6204 Shadow Mountain Cv Austin, TX 78731-4110	•••••	\$150.00	 
			(If travel outside of	Texas, complete Schedule T)
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/07/2014	Contributor address; City; State; Zip Code 1607 Kerr Ave Austin, TX 78704-1424	••••••	\$250.00	 
			(if travel outside of	Texas, complete Schedule T)
Principal occu Owner	pation / Job title (See Instructions)	Employer (See In: Bicycle Sport SI	structions)	
Dale	Full name of contributor  out-of-state PAC (ID# AFSCME Public Employees Organized to Promot Equality	C00011114 ) e Legislative	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/22/2014	Contributor address; City; Slate; Zip Code 1625 L St NW Washington, DC 20036-5665		\$350.00	<u> </u> 
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See Ins	structions)	
Dale	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/05/2014	Contributor address; City; State; Zip Code 1204 Castle Hill St Austin, TX 78703-4126	• • • • • • • • • • • • • • • • • • • •	\$150.00   	
			(If travel outside of 1	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins		
Date	Full name of contributor	)	Amount of   contribution (\$)	In-kind contribution description (if applicable)
09/04/2014	Contributor address; City; State; Zip Code 1101 Grove Blvd Apt 703	• • • • • • • • • • • • • • • • • • • •	\$200.00	
	Austin, TX 78741-3513	works a spirit of the spirit o	If tennial model and the	·
Principal occupa Professor	ation / Job title (See Instructions)	Employer (See Insi Austin Communi	ructions)	exas, complete Schedule T)

POLIT	ICAL CONTRIBUTIONS R THAN PLEDGES OR LOA		SCHEDULE A	
The Instruc	TION GUIDE explains how to complete this form.		1 PAGE #	
2 FILER NAME	Casar, Gregorio		3 ACCOUNT # 00000010	(24 Report: 4/58 (Ethics Commission filers)
4 Date	5 Full name of contributor  ut-of-state PAC (ID: Alvarez, Grace	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
09/16/2014	6 Contributor address; City; State; Zip Code 1406 N Georgetown St Round Rock, TX 78664-3211	•••••	\$350.00	 
			(If travel outside of	Texas, complete Schedule T)
9 Principal occu Floral Desig	pation / Job title (See Instructions) n	10 Employer (See In Violet Hill	structions)	
Date	Full name of contributor ☐ out-of-state PAC (ID# Alvi, Shahin	()	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/14/2014	Contributor address; City; State; Zip Code 1107 Quaker Ridge Dr Austin, TX 78746-6340	• • • • • • • • • • • • • • • • • • • •	\$100.00	 
			(if travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See Ins		
Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/20/2014	Contributor address; City; State: Zip Code 9906 Dorset Dr Austin, TX 78753-4414		\$100.00   	! !
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See Ins		
Date	Full name of contributor  uut-of-state PAC (ID# Austin Board of Realtors PAC	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/24/2014	Contributor address; City; State; Zip Code 4106 Medical Parkway Austin, TX 78756		\$350.00     1	
			(If travel outside of 7	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See Inst		The state of the s
Date	Futi name of contributor  ut-of-state PAC (ID#_Ayres, Robert	)	Amount of   contribution (\$)	In-kind contribution description (if applicable)
08/07/2014	Contributor address; City; State; Zip Code 2408 Keating Ln Austin, TX 78703-2342		\$350.00	
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Principal occup	ation / Job title (See Instructions)	Employer (See Inst		exas, complete Schedule T)
Land Steward		Shield Ranch	rucions)	**************************************

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/	34 Report: 5/58
FILER NAME	Casar, Gregorio		3 ACCOUNT# 00000010	(Ethics Commission filers)
Date	5 Full name of contributor  uut-of-state PAC (ID Barrett, Kathleen	#}	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
9/17/2014	6 Contributor address; City; State; Zip Code 9011 Blue Quail Austin, TX 78758		\$200.00	 
			(If travel outside of	Texas, complete Schedule T)
Principal occup Counselor	ation / Job title (See Instructions)			
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
8/27/2014	Contributor address; City; State; Zip Code 2503 Flora Cv Austin, TX 78746-6902		\$100.00	    -
			(If travel outside of	Tamas assessable Cabacada Til
Principal occup	ation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule 1)
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Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
8/28/2014	Contributor address; City; State; Zip Code 360 Nueces St Apt 3204 Austin TX 78701-4274		\$101.00	<b>(</b> 
	7.00.01, 77.70.714		(If travel outside of	Texas, complete Schedule T)
rincipal occupa	ation / Job title (See Instructions)	Employer (See In		, , , , , , , , , , , , , , , , , , ,
Date	Full name of contributor  ut-of-state PAC (ID# Blackburn Betts PLLC	<del>/</del> )	Amount of contribution (\$)	in-kind contribution description (if applicable)
9/18/2014	Contributor address; City; State; Zip Code 1106 San Antonio St Austin, TX 78701-2109	• • • • • • • • • • • • • • • • • • • •	\$200.00	
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rincipal occupa	ation / Job title (See Instructions)	Employer (See In-		Texas, complete Schedule T)
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Date	Full name of contributor	)	Amount of   contribution (\$)	In-kind contribution description (if applicable)
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rincipal occupa	tion / Job title (See Instructions)	Employer (See Ins	tructions)	
	Date Date  Principal occup Counselor  Date  8/27/2014  Principal occup  Date  8/28/2014  Principal occupa  Date  Date	Date   5 Full name of contributor   out-of-state PAC (ID Barrett, Kathleen     09/17/2014   6 Contributor address; 9011 Blue Quail Austin, TX 7875B	Date   5 Full name of contributor   out-of-state PAC (ID#	FILER NAME Casar, Gregorio  3 ACCOUNT # 00000010  Date  5 Full name of contributor

The Instruct	ION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/	/34 Report: 6/58
2 FILER NAME	Casar, Gregorio		3 ACCOUNT # 00000010	(Ethics Commission filers)
4 Date	5 Full name of contributor	#)	7 Amount of contribution (\$)	8   In-kind contribution description (if applicable)
09/19/2014	6 Contributor address; City; State; Zip Code 7312 Ogden Ave Apt 6 Riverside, IL 60546-2647	••••••	\$350.00	 
			(If travel outside of	Texas, complete Schedule T)
9 Principal occu Agricultural o	pation / Job title (See Instructions) commodities trader & broker	10 Employer (See In Self	nstructions)	
Date	Full name of contributor	<b>*</b> )	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/25/2014	Contributor address; Cily; State; Zip Code 2000 Short Summer Dr Austin, TX 78754-5857		\$75.00	† [
				_
Principal occur	Dation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule T)
	(and the desired of t	Employer (See in	structions)	
Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/01/2014	Contributor address; City; State; Zip Code 12001 Remington Rd Oklahoma City, OK 73170-4853		\$250.00	 
			(If travel outside of	Texas, complete Schedule T)
Principal occup President	ation / Job title (See Instructions)	Employer (See In: Brewer Enterpri		
Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/07/2014	Contributor address; City; State; Zip Code 7802 Swindon Ln Austin, TX 78745-6826		<b>\$200</b> .00	
			(If travel outside of	Texas, complete Schedule T)
Educator	ation / Job title (See Instructions)	Employer (See Ins Texas AFT	structions)	
Date	Full name of contributor	· · · · · · · · · · · · · · · · · · ·	Amount of   contribution (\$)	In-kind contribution description (if applicable)
09/25/2014	Contributor address; City: State; Zip Code 6405 Cascada Dr Austin, TX 78750-8156		\$100.00     	
		And the second s	(If travel outside of 1	Fexas, complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employer (See Ins	tructions)	

POLIT OTHE	ICAL CONTRIBUTIONS R THAN PLEDGES OR LOA	NS	U (512)463-580	SCHEDULE <b>A</b>
The Instruc	тіон Guide explains how to complete this form.		1 PAGE #	204 D 4: 7/50
2 FILER NAME	Casar, Gregorio		3 ACCOUNT # 00000010	(24 Report: 7/58 (Ethics Commission filers)
4 Date	5 Futt name of contributor	)#)	7 Amount of contribution (\$)	8
0 7/20/2014	6 Contributor address; City, State; Zip Code 6500 Santolina Cv Austin, TX 78731-2806	• • • • • • • • • • • • • • • • • • • •	\$100.00	 
			(If travel outside of	Texas, complete Schedule T)
9 Principal occi	upation / Job title (See Instructions)	10 Employer (See In		
Dale	Full name of contribulor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/23/2014	Contributor address; City; State; Zip Code 2430 Worchester Rd Midlothian, VA 23113-6058	***************	\$350.00	  - 
			(If travel outside of	Texas, complete Schedule T)
Principal occu CEO	pation / Job title (See Instructions)	Employer (See In:	structions)	
		Slipper App, Inc	<b>i.</b>	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/21/2014	Contributor address; City; State; Zip Code 7000 Timarou Ter Austin, TX 78754-5738		\$100.00   	 
			(If travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See Ins		- overs' combiners ochedule ()
Date	Full name of contributor ☐ out-of-state PAC (ID# Cherian, Antony	<b>f</b> )	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/15/2014	Contributor address; City; State; Zip Code 5807 Lookout Mountain Dr Austin, TX 78731-3617		\$100.00 <mark> </mark>	
			(If travel outside of T	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins		aves (complete delledule 1)
Date	Full name of contributor  out-of-state PAC (ID# Chernet, Tsegaye		Amount of   contribution (\$)	In-kind contribution description (if applicable)
08/28/2014	Contributor address; City; State; Zip Code PO Box 144542 Austin, TX 78714-4542		\$300.00	
Vinnessee			(If travel outside of T	exas, complete Schedule T)
Principal occupi Driver	ation / Job title (See Instructions)	Employer (See Inst		and, complete ochequie ()
especia w result		Lonestar Cab		**

_	The Instruct	וסו Guide explains how to complete this form.		1 PAGE # Schedule: 6/	34 Report: 8/58
2	FILER NAME	Casar, Gregorio		3 ACCOUNT# 00000010	(Ethics Commission filers)
4	Date	5 Full name of contributor  ut-of-state PAC (ID Chimenti, Danette	)#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	09/18/2014	6 Contributor address; City; State; Zip Code 200 The Cir Austin, TX 78704-2418		\$350.00	 
L				(if travel outside of	Texas, complete Schedule T)
9	Consultant	pation / Job title (See Instructions)	10 Employer (See I Self	nstructions)	
	Date	Full name of contributor  ut-of-slate PAC (ID Church, Danielle	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/20/2014	Contributor address; City; State; Zip Code 17306 Autumn Oak Ct Spring, TX 77379-5556		\$350.00	 
				(If travel outside of	≀ Texas, complete Schedule T)
	Principal occup Attorney	pation / Job title (See Instructions)	Employer (See In	nstructions)	
		_	vvaller Lansger	n Dortch & Davis, L	LP
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/11/2014	Contributor address; City; State; Zip Code 1201 County Road 138 Hutto, TX 78634-5127	••••••	\$350.00	† †
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In Cirkiel & Assoc	structions)	4
	Date	Full name of contributor	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/11/2014	Contributor address; City; State; Zip Code 1201 County Road 138 Hutto, TX 78634-5127		\$350.00	
				(If travel outside of 1	Texas, complete Schedule T)
	Principal occup Real Estate	ation / Job title (See Instructions)	Employer (See In M.E. Gene Johr	structions) nson Realtors, Inc	
*	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
1	07/08/2014	Contributor address; City; State; Zip Code 912 E 48th St Austin, TX 78751-3407		\$350.00 <mark> </mark> 	
	Orioninal	tion ( lak 64 - 10 - lak 64 - lak 64 - 10 - lak 64 - lak 64 - 10 - lak 64 - lak 64 - 10 - lak 64 - lak 64 - 10 - lak 64 - lak 64 - 10 - lak 64 - lak 64 - 10 - lak 64 - lak 64 - 10 - lak 64 -			exas, complete Schedule T)
nosid-dension desco	Publicist	ation / Job title (See Instructions)	Employer (See Ins Pitch Control Pu		-

Ste. 1400 Austin, TX 78701

Date

09/17/2014

Principal occupation / Job title (See Instructions)

DasGupta, Sumit

Contributor address;

8900 Bluegrass Dr Austin, TX 78759-7168

Principal occupation / Job title (See Instructions)

Full name of contributor ut-of-state PAC (ID#

City; State; Zip Code

#### **POLITICAL CONTRIBUTIONS** SCHEDULE A OTHER THAN PLEDGES OR LOANS The INSTRUCTION GUIDE explains how to complete this form. 1 PAGE# Schedule: 7/34 Report: 9/58 2 FILER NAME Casar, Gregorio 3 ACCOUNT # (Ethics Commission filers) 00000010 Date Amount of In-kind contribution Clinton, Ryan contribution (\$) description (if applicable) 6 Contributor address; 07/21/2014 City; State; Zip Code \$100.00 8509 Adirondack Cv Austin, TX 78759-7917 (If travel outside of Texas, complete Schedule T) 9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Date Amount of In-kind contribution Cofer Rick contribution (\$) description (if applicable) 09/25/2014 Contributor address; City; State; Zip Code \$100.00 507 Pressler St Apt 4132 Austin, TX 78703-5192 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Amount of In-kind contribution Cooper, Charles contribution (\$) description (if applicable) 08/25/2014 Contributor address; City; State; Zip Code \$350.00 939 N High St **Unit 202** Columbus, OH 43201-2555 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Attorney Unemployed Date Full name of contributor ut-of-state PAC (ID# Amount of In-kind contribution Curry, Michael contribution (\$) description (if applicable) Contributor address; 09/15/2014 City; State; Zip Code \$100.00 700 Lavaca St.

Amount of

contribution (\$)

\$100.00

Employer (See Instructions)

(If travel outside of Texas, complete Schedule T)

In-kind contribution

description (if applicable)

	ICAL CONTRIBUTIONS R THAN PLEDGES OR LOA	.NS	<del>) (312)463-380</del>	SCHEDULE A
The Instruct	тюн Guide explains how to complete this form.		1 PAGE #	24 Daniel 40/00
2 FILER NAME	Casar, Gregorio		3 ACCOUNT# 00000010	34 Report: 10/58 (Ethics Commission filers)
4 Date	5 Full name of contributor  ut-of-state PAC (iD Daywood, Barbara	#)		8 In-kind contribution description (if applicable)
0 7/30/2014	6 Contributor address; City; State; Zip Code 11231 Tracton Ln Austin, TX 78739-1401		\$300.00	! ! !
			(if travel outside of	Texas, complete Schedule T)
9 Principal occu Realtor	pation / Job title (See Instructions)	10 Employer (See In Self	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/18/2014	Contributor address; City; State; Zip Code 7821 Wisteria Valley Dr Austin, TX 78739-1993	• • • • • • • • • • • • • • • • • • • •	\$100.00	 
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In:		
Date				
Dale	Full name of contributor	<u>,                                     </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/20/2014	Contributor address; City; State; Zip Code 9 Niles Rd Austin, TX 78703-3138		\$350.00   	
			(If travel outside of 1	Texas, complete Schedule T)
Principal occup Writer	pation / Job title (See Instructions)	Employer (See Ins Self		
Date	Full name of contributor	)	Amount of   contribution (\$)	In-kind contribution description (if applicable)
09/20/2014	Contributor address; City; State; Zip Code 9 Niles Rd Austin, TX 78703-3138		\$350.00   	
			(If travel outside of T	exas, complete Schedule T)
Principal occup Partner	ation / Job title (See Instructions)	Employer (See Ins Kiliam Oil Compa	tructions)	oxas, complete schedule 17
Date	Full name of contributor		Amount of   contribution (\$)	In-kind contribution description (if applicable)
08/20/2014	Contributor address; City; State; Zip Code 508 Genard St Austin, TX 78751-1912		\$200.00	
		поставления	(If travel outside of To	exas, complete Schedule T)
Principal occupa Executive Dire	ation / Job title (See Instructions)	Employer (See Inst		

POLIT OTHE	ICAL CONTRIBUTIONS R THAN PLEDGES OR LOA	ANS		SCHEDULE A
The Instruc	TION GUIDE explains how to complete this form.		1 PAGE #	/34 Report: 11/58
2 FILER NAME	Casar, Gregorio		3 ACCOUNT # 00000010	(Ethics Commission filers)
4 Date	5 Full name of contributor 🔯 out-of-state PAC (I Eastern Missouri Laborers' Educational and Be	D#) nevolent Fund	7 Amount of contribution (\$)	8
0.8/27/2014	6 Contributor address; City; State; Zip Code 3450 Hollenberg Dr Bridgeton, MO 63044-2405		\$350.00	 
9 Principal occu	upation / Job title (See Instructions)	10 Employer (See	(If travel outside of nstructions)	Texas, complete Schedule T)
Date	Full name of contributor	O#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/22/2014	Contributor address; City; State; Zip Code 316 West 12th St. Ste. 202 Austin, TX 78701	• • • • • • • • • • • • • • • • • • • •	\$350.00	! ! !
			(If travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See I	nstructions)	, , , , , , , , , , , , , , , , , , , ,
Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/20/2014	Contributor address; City; State; Zip Code 1522 Thibodeaux Dr Round Rock, TX 78664-7209		\$300.00	
5			(If travel outside of	Texas, complete Schedule T)
Driver	pation / Job title (See Instructions)	Employer (See Ir AB Cab Co.	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/20/2014	Contributor address; City; State; Zip Code 2505 Alexander Ct Round Rock, TX 78665-7917	••••••	\$300.00 <mark> </mark>   	
Principal occup Oriver	ation / Job title (See Instructions)	Employer (See In: Lonestar Cab		exas, complete Schedule T}
Date	Sull constitution of the sull constitution of			
Date	Full name of contributor  ut-of-state PAC (ID#	<del>;</del> )	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/19/2014	Confributor address; City; State; Zip Code 5508 Janice Ave Kenner, LA 70065-1540		\$350.00   	
- Caladia I L	Alon ( E. b. )			exas, complete Schedule T)
Principal occupa Programmer	ation / Job title (See Instructions)	Employer (See Ins Force Multiplier	tructions) Solutions, Inc.	

POLIT OTHE	TICAL CONTRIBUTIONS R THAN PLEDGES OR LOA	NS		SCHEDULE A
The Instruc	TION GUIDE explains how to complete this form.		1 PAGE#	
2 FILER NAME	E Casar, Gregorio	www.	Schedule: 1 3 ACCOUNT # 00000010	0/34 Report: 12/58 (Ethics Commission filers)
4 Date	5 Full name of contributor	)#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
0 9/23/2014	6 Contributor address; City; State; Zip Code 2 Rose St Somerville, MA 02143-3811		\$51.00	1
9 Principal occu	upation / Job title (See Instructions)	Ties		f Texas, complete Schedule T)
Advocate	The state (of this st	10 Employer (See In MASSPIRG	istructions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/23/2014	Contributor address; City; State; Zip Code 2 Rose St Somerville, MA 02143-3811	***************************************	. \$199.00	 
Principal occu	pation / Job title (See Instructions)		(If travel outside o	Texas, complete Schedule T)
	parion 7 300 title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/04/2014	Contributor address; City; State; Zip Code 4904 Tahoe Trl Austin, TX 78745-1556		\$20.00	! ! !
Principal poour	Potting / Joh Gills (Op. 1)		(if travel outside of	Texas, complete Schedule T)
- Mileipai Sceup	pation / Job title (See Instructions)	Employer (See Ins	structions)	
Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/17/2014	Contributor address; City; State; Zip Code 4904 Tahoe Trl Austin, TX 78745-1556	• • • • • • • • • • • • • • • • • • • •	\$100.00 !	<b>!</b> !
Principal accura				Texas, complete Schedule T)
r melpar occup	ation / Job title (See Instructions)	Employer (See Ins	tructions)	
Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable) music for event
09/24/2014	Contributor address; City: State; Zip Code 1704 Meander Dr. Austin, TX 78721	• • • • • • • • • • • • • • • • • • • •	\$200.00	THUSIC TOT BYETH
			(If france) modernia * **	· · · · · · · · · · · · · · · · · · ·
Principal occupa artist	ition / Job title (See Instructions)	Employer (See Insti		exas, complete Schedule T)

OTHER THAN PLEDGES OR LOANS					
The Instruct	TON GUIDE explains how to complete this form.		1 PAGE# Schedule: 1:	1/34 Report: 13/58	
2 FILER NAME	Casar, Gregorio		3 ACCOUNT # 00000010	(Ethics Commission filers)	
4 Date	5 Full name of contributor  out-of-state PAC (IE Garcia & Garcia Attorneys at Law PLLC	D#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
09/24/2014	6 Contributor address; City; State; Zip Code PO Box 140028 Austin, TX 78714		\$350.00	 	
			(If travel outside of	Texas, complete Schedule T)	
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See In	nstructions)		
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
07/31/2014	Contributor address; City; State; Zip Code 3408 Timberwood Cir Austin, TX 78703-1013		\$100.00	! !	
				[	
Principal occu	Leation / Job title (See Instructions)	Employer (See In	<u></u>	Texas, complete Schedule T)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
08/18/2014	Contributor address; City; State; Zip Code 8624 Young Ln Austin, TX 78737-3154	••••••	\$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)	
08/25/2014	Contributor address; City; State; Zip Code 8106 Chainfire Cv Austin, TX 78729-6421	, , , , , , , , , , , , , , , , , , , ,	\$100.00	  - 	
			(If travel outside of	Texas, complete Schedule T)	
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)		
Date	Full name of contributor	<del>'</del> )	Amount of contribution (\$)	In-kind contribution description (if applicable)	
07/17/2014	Contributor address; City; State; Zip Code 2501 Stratford Dr Austin, TX 78746-5755	, , , , , , , , , , , , , , , , , ,	\$150.00   		
Danciani ana	refine I had title (Con leaders)		The state of the s	Texas, complete Schedule T)	
Cilicipal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)		

The Instruction Guide explains how to complete this form.  1 PAGE # Schedule: 12/34 Report: 14/58 2 FILER NAME Casar, Gregorio  3 ACCOUNT# (Ethics Commission 00000010)  4 Date 5 Full name of contributor  out-of-state PAC (ID#  octribution (\$)   8 In-kind contribution (\$)   6 Contributor address; City; State; Zip Code 2722 High Point Dr Round Rock, TX 78664-5790  9 Principal occupation / Job title (See Instructions) Accountant  10 Employer (See Instructions) Financial freedom  Date Full name of contributor  out-of-state PAC (ID#  out-of-state PAC (ID#  octribution (\$)   Amount of contribution (\$)   In-kind contribution (\$)   Glazer, Matt	on filers) ribution applicable) edule T)		
2 FILER NAME Casar, Gregorio  3 ACCOUNT # (Ethics Commission 00000010  4 Date 5 Full name of contributor	ribution applicable) edule T)		
4 Date 5 Full name of contributor out-of-state PAC (ID#	edule T)		
2722 High Point Dr Round Rock, TX 78664-5790  [If travel outside of Texas, complete Sche Principal occupation / Job title (See Instructions) Accountant  Date Full name of contributor out-of-state PAC (ID#)  Amount of In-kind contri	ibution		
9 Principal occupation / Job title (See Instructions) Accountant  10 Employer (See Instructions) Financial freedom  Date  Full name of contributor  ut-of-state PAC (ID#) Amount of In-kind contributor	ibution		
Accountant    Financial freedom			
Amount of In-kind contri			
description (ii a	,,		
O9/10/2014 Contributor address; City; State; Zip Code \$250.00   Substin, TX 78745-2123			
(If travel outside of Texas, complete Sche	edule T)		
Principal occupation / Job title (See Instructions)  Executive Director  Employer (See Instructions)  Austin Young Chamber of Commerce	estructions)		
Date  Full name of contributor	pplicable)		
09/18/2014			
(if travel outside of Texas, complete Sche	(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)  Employer (See Instructions)			
Date Full name of contributor   out-of-state PAC (ID#)   Amount of   In-kind contrib	bution		
Guthikonda, Amini contribution (\$) description (if ap	oplicable)		
09/14/2014 Contributor address; City; State; Zip Code \$350.00 Austin, TX 78759-6445			
(If travel outside of Texas, complete Scheo	dula Ti		
Principal occupation / Job title (See Instructions)  Yoga Instructor  Employer (See Instructions)  Self Employed	<u>заеч, Ш</u>		
Date Full name of contributor  out-of-state PAC (ID#) Amount of In-kind contrib			
Guthikonda, Gopal contribution (\$) description (if ap			
09/14/2014			
(If travel outside of Texas, complete Sched	fule T)		
Principal occupation / Job title (See Instructions) Engineer  Employer (See Instructions) CP&Y, Inc			

POLIT	ICAL CONTRIBUTIONS R THAN PLEDGES OR LOA	NS		SCHEDULE A	
The Instruction Guide explains how to complete this form.			1 PAGE#	204 5	
2 FILER NAME	Casar, Gregorio		3 ACCOUNT # 00000010	3/34 Report: 15/58 (Ethics Commission filers)	
4 Date	5 Full name of contributor  ut-of-state PAC (ID Hadnot, Carolyn	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
09/19/2014	6 Contributor address; City; State; Zip Code 8204 Brettonwoods Lane Austin, TX 78753		\$100.00	 	
A Dringing on			(If travel outside of	Texas, complete Schedule T)	
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See Ir	nstructions)		
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
08/25/2014	Contributor address; City; State; Zip Code 2722 High Point Dr Round Rock, TX 78664-5790	••••••	\$300.00	! ! !	
			(If travel outside of	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)  Financial Freedom  Employer (See Instructions)  Production					
Date	Full name of contributor	<u>/)</u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
09/02/2014	Contributor address; City; State; Zip Code 7820 Prospect Ave Kansas City, MO 64132-3403		\$350.00		
Principal compatible / John Willy (Oct.)			(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions) En		Employer (See In:	structions)		
Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
07/28/2014	Contributor address; City; State; Zip Code 9426 Hunters Trce Austin, TX 78758-6202		\$50.00     		
Bain sin al				Texas, complete Schedule T)	
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)		
Date	Full name of contributor	)	Amount of   contribution (\$)	In-kind contribution description (if applicable)	
09/15/2014	Contributor address; City; State; Zip Code 9426 Hunters Trce Austin, TX 78758-6202	• • • • • • • • • • • • • • • • • • •	\$50.00     		
			(If travel outside of Texas, complete Schedule T)		
нппсіраї оссирі	ation / Job title (See Instructions)	Employer (See Ins	tructions)		

The Instruction Guide explains how to complete this form.			1 PAGE # Schedule: 14/34 Report: 16/58		
2 FILER NAME	Casar, Gregorio		3 ACCOUNT# 00000010	(Ethics Commission filers)	
4 Date	5 Full name of contributor  ut-of-state PAC (ID Herring, Charles	)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
0 7/16/2014	6 Contributor address; City; State; Zip Code 1204 Castle Hill St Austin, TX 78703-4126		\$350.00	 	
			(if travel outside of	Texas, complete Schedule T)	
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See In Herring & Irwin			
Date	Full name of contributor	# C00027342 )	Amount of contribution (\$)	In-kind contribution description (if applicable)	
09/17/2014	Contributor address; City; State; Zip Code 900 7th St NW Washington, DC 20001-3886		\$350.00	 	
			(if travel outside of	Texas, complete Schedule T)	
Principal occu	pation / Job title (See Instructions)	Employer (See In		Taxas, compate acreadile 1)	
Date	Full name of contributor  ut-of-state PAC (ID# Johnson, Donald	)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
09/19/2014	Contributor address; City; State; Zip Code 1135 Burdette St New Orleans, LA 70118-3972	· · · · · · · · · · · · · · · · · · ·	\$350.00   		
Principal occur	pation / Job title (See Instructions)			Texas, complete Schedule T)	
Accountant	version 7 200 time (See instructions)	Employer (See In Leon Lowe and			
Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
08/20/2014	Contributor address; City; State; Zip Code 1604 E 11th St Austin, TX 78702-2716	• • • • • • • • • • • • • • • • • • • •	   150.00 		
		-	(If travel outside of 1	exas, complete Schedule T)	
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)		
Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
09/14/2014	Contributor address; City; State; Zip Code 2704 Woodland Hills Cv Austin, TX 78732-2096		\$100.00   		
		and the same of th	(If travel outside of T	exas, complete Schedule T)	
Principal occupi	ation / Job title (See Instructions)	Employer (See Ins	tructions)		
				According to the second	

The Instruct	юм Guide explains how to complete this form.		1 PAGE # Schedule: 15	5/34 Report: 17/58
2 FILER NAME	Casar, Gregorio		3 ACCOUNT# 00000010	(Ethics Commission filers)
4 Date	5 Full name of contributor	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
08/27/2014	6 Contributor address; City; State; Zip Code 2958 Donnell Dr Round Rock, TX 78664-5709		\$300.00	 
			(If travel outside of	Texas, complete Schedule T)
9 Principal occu Operator	pation / Job title (See Instructions)	10 Employer (See In Capital Metro	estructions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/27/2014	Contributor address; City; State; Zip Code 17205 Tobermory Dr Pflugerville, TX 78660-1726		\$300.00	   
			(IF through puts) do a F	·
Principal occup	I pation / Job title (See Instructions)	Employer (See In	1.	Texas, complete Schedule T)
Attendant		DPS		
Date	Full name of contributor	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/05/2014	Contributor address; City; State; Zip Code 4115 Abingdon Dr Garland, TX 75043-7251		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
COO	pation / Job title (See Instructions)	Employer (See In: Force Multiplier		
Date	Full name of contributor	<del>/)</del>	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/05/2014	Contributor address; City; State; Zip Code 4115 Abingdon Dr Garland, TX 75043-7251		   350.00 	
		ACCOUNTS OF THE PROPERTY OF TH	(If travel outside of 1	Texas, complete Schedule T)
Principal occup Homemaker	ation / Job title (See Instructions)	Employer (See Ins Homemaker	structions)	
Date	Full name of contributor	)	Amount of   contribution (\$)	tn-kind contribution description (if applicable)
09/08/2014	Contributor address; City, State; Zip Code 7914 Bee Cave Rd Austin, TX 78746-4903	***************************************	\$350.00 <mark> </mark>   I	
Principal accur	ation / Job title (See Instructions)			exas, complete Schedule T)
CEO	and the face mandelions)	Employer (See Ins Encotech Engine	ering	

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The Instruct	TION GUIDE explains how to complete this form.		1 PAGE # Schedule: 16	6/34 Report: 18/58
2 FILER NAME	Casar, Gregorio		3 ACCOUNT# 00000010	(Ethics Commission filers)
4 Date	5 Full name of contributor	)#)	7 Amount of contribution (\$)	8   In-kind contribution description (if applicable)
09/08/2014	6 Contributor address; City; State; Zip Code 7914 Bee Cave Rd Austin, TX 78746-4903		\$350.00	 
			(If travel outside of	Texas, complete Schedule T)
9 Principal occu Owner	pation / Job title (See Instructions)	10 Employer (See In Accurate CAD	nstructions) & Technical Servi	ces, Inc.
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/13/2014	Contributor address; City; State; Zip Code 755 E Ottorf St Apt 201		\$100.00	[   
	Austin, TX 78704-5691		lif tenunt nutnish of	
Principal occu	pation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule T)
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/16/2014	Contributor address; City; State; Zip Code 20521 Auk Rd Pflugerville, TX 78660-7836	•••••••••••	\$100.00	! ! !
Principal occur	ation / Job title (See Instructions)	[	1	Texas, complete Schedule T)
· · · · · · · · · · · · · · · · · · ·	salorr soo die (see manuchons)	Employer (See In	structions)	
Date	Full name of contributor	; <u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/15/2014	Contributor address; City; State; Zip Code 2804 Deercreek Cir Austin, TX 78703-1115		\$200.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Real Estate/R	ation / Job title (See Instructions) Retired	Employer (See In: Self-Dimension	structions) Properties/ Retire	ed
Date	Full name of contributor  out-of-state PAC (ID# Lamy, Joseph	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/09/2014	Contributor address; City; State; Zip Code 1717 W 6th St Ste 445		\$350.00	
	Austin, TX 78703-4791		!	
Principal occurs	ation / Job title (See Instructions)			Texas, complete Schedule T)
Real Estate D		Employer (See Ins Capital City Part	,	·

#### P.O.Box 12070 Austin, Texas 78711-2070 (512)463-5800 **POLITICAL CONTRIBUTIONS** SCHEDULE A OTHER THAN PLEDGES OR LOANS PAGE # The INSTRUCTION GUIDE explains how to complete this form. Schedule: 17/34 Report: 19/58 2 FILER NAME Casar, Gregorio 3 ACCOUNT# (Ethics Commission filers) 00000010 5 Full name of contributor out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Lamy, Leslie 09/09/2014 6 Contributor address: Clty; State; Zip Code \$350.00 1717 W 6th St Ste 445 Austin, TX 78703-4791 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Homemaker Homemaker Date Amount of In-kind contribution cantribution (\$) description (if applicable) Langford, Randy 09/09/2014 Contributor address; City; State; Zip Code \$350.00 1104 Nueces St Ste 204 Austin, TX 78701-2106 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) The Langford Firm, PLLC Attorney Date Amount of In-kind contribution description (if applicable) contribution (\$) Law Office of Paul Quinzi 08/28/2014 Contributor address; City; State; Zip Code \$350.00 707 W 10th St Austin, TX 78701-2033 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Amount of In-kind contribution contribution (\$) description (if applicable) LeBlanc, Heather 09/12/2014 Contributor address; City; State; Zip Code \$350.00 2607 Arizona Dr Marrero, LA 70072-6107 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Service Coordinator Force Multiplier Solutions, Inc. Full name of contributor ut-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Leonard, Linda 09/11/2014 Contributor address; City; State; Zip Code \$350.00 7122 Royal Ln Dallas, TX 75230-3608 (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) Homemaker Homemaker

	INET	THAN PLEDGES OR LOA	.NS		
The	İnstructi	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 18	3/34 Report: 20/58
2 FILE	R NAME	Casar, Gregorio		3 ACCOUNT# 00000010	(Ethics Commission filers)
<b>4</b> Da	ale	5 Full name of contributor  ut-of-state PAC (ID Leonard, Robert	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
09/1	1/2014	6 Contributor address; City; State; Zip Code 7122 Royal Ln Dallas, TX 75230-3608		\$350.00	! !
				(If travel outside of	Texas, complete Schedule T)
	ipal occup irman an	pation / Job title (See Instructions) d CEO	10 Employer (See In Force Multiplier		
Da	ate	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/2	5/2014	Contributor address; City; State; Zip Code 802 Highland Ave Austin, TX 78703-5112		\$100.00	 
					·
Princ	inal occur	pation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule T)
		one the (one head that)	Limployer (See III	su ucuons)	
Da	te	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/20	0/2014	Contributor address; City; State; Zip Code 4509 Edgemont Dr Austin, TX 78731-5223		\$200.00	 
				(If travel outside of	Texas, complete Schedule T)
Princi Exec		ation / Job title (See Instructions)	Employer (See In Forward Texas	structions)	
Đa	te	Full name of contributor	4)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/18	3/2014	Contributor address; City; State; Zip Code 1108 Lavaca St Austin, TX 78701-2172	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$100.00	 
				(if travel outside of	Texas, complete Schedule T)
Princip	pal occup	ation / Job title (See Instructions)	Employer (See In:	structions)	
Dat	le	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/25	/2014	Contributor address; City; State; Zip Code 101 Colorado St 1602		\$350.00	
	and the same of th	Austin, TX 78701-4103			goons
Princir	pal occurs	ation / Job title (See Instructions)	Employee (Carla		Texas, complete Schedule T)
Lawye		nion, see the peet mandenons/	Employer (See Ins Loewy Law Firm		

#### P.O.Box 12070 Texas Ethics Commission Austin, Texas 78711-2070 (512)463-5800 TDD 1-800-735-2989 POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS The Instruction Guide explains how to complete this form. 1 PAGE# Schedule: 19/34 Report: 21/58 2 FILER NAME Casar, Gregorio 3 ACCOUNT# (Ethics Commission filers) 00000010 Date Amount of In-kind contribution Long, Jennifer contribution (\$) description (if applicable) 07/15/2014 6 Contributor address; City; State; Zip Code \$350.00 211 W Live Oak St Austin, TX 78704-5114 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Director Casa Marianella Date Amount of In-kind contribution Long, Walter contribution (\$) description (if applicable) 07/15/2014 Contributor address; City; State; Zip Code \$350.00 211 W Live Oak St Austin, TX 78704-5114 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) **Attorney** Self Date Amount of In-kind contribution Mahone, Ghislaine contribution (\$) description (if applicable) music for event 09/10/2014 Contributor address; City; State; Zip Code \$300.00 1215 Delano St Austin, TX 78721 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) musician self Date Amount of In-kind contribution McCann, Emily contribution (\$) description (if applicable) 07/31/2014 Contributor address; City; State; Zip Code \$100.00 2909 Dover Pl Austin, TX 78757-4351 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor □ cut-of-state PAC (ID#\_ Amount of In-kind contribution Meachum, Kurt contribution (\$) description (if applicable) 09/09/2014 Contributor address: City; State; Zip Code \$350.00 3900 Sidehill Path Austin, TX 78731-1418 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Consultant Phillips and Meachum Public Affairs

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE#	
			Schedule: 20	0/34 Report: 22/58
2 FILER NAME	Casar, Gregorio		3 ACCOUNT# 00000010	(Ethics Commission filers)
4 Date	5 Full name of contributor  aut-of-state PAC (ID)	¥ )	7 Amount of	8 In-kind contribution
	Melesse, Genet	······································	contribution (\$)	description (if applicable)
08/20/2014	6 Contributor address; City; State; Zip Code 1522 Thibodeaux Dr Round Rock, TX 78664-7209	• • • • • • • • • • • • • • • • • • • •	\$300.00	1
			(If travel outside of	Texas, complete Schedule T)
	Justion / Job title (See Instructions) Il business owner	10 Employer (See In Self	structions)	
Date	Full name of contributor  ut-of-state PAC (ID#	· · · · · · · · · · · · · · · · · · ·	Amount of	In-kind contribution
	Mersha, Abera	· · · · · · · · · · · · · · · · · · ·	contribution (\$)	description (if applicable)
08/21/2014	Contributor address; City; State; Zip Code 9001 Briardale Dr		\$200.00	<b> </b> 
	Austin, TX 78758-6429		464	
Principal occur	pation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule T)
Driver	State 1 and the face mandening	Lonestar Cab	structions)	
Date	Full name of contributor	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/21/2014	Contributor address; City; State; Zip Code 9001 Briardale Dr Austin, TX 78758-6429		\$200.00	
	74ddiii, 17770700-0425		(If travel outside of	Texas, complete Schedute T)
	ation / Job title (See Instructions)	Employer (See In:	structions)	
Homemaker		None		
Date	Full name of contributor  ut-of-state PAC (ID#	·)	Amount of	In-kind contribution
	Mersha, Zenaw		contribution (\$)	description (if applicable)
08/21/2014	Contributor address; City; State; Zip Code 9001 Briardale Dr Austin, TX 78758-6429		\$300.00	! 
and the second s			(If travel outside of	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins		The state of the s
Driver		Lonestar Cab	,	
Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/15/2014	Contributor address; City; State; Zip Code 1615 Clover St Mandeville, LA 70448-8327		\$350.00	
The state of the s		and the second s	(If travel outside of	Texas, complete Schedule T)
	ation / Job title (See Instructions)	Employer (See Ins		The second of th
Software & Ha	ardware Admin	Force Multiplier		

	The Instructi	ON GUIDE explains how to complete this form.		1 PAGE #	//34 Report: 23/58
2	FILER NAME	Casar, Gregorio		3 ACCOUNT # 00000010	(Ethics Commission filers)
4	Date	5 Full name of contributor  ul-of-state PAC (ID Michener, Elizabeth	)#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
•	09/11/2014	6 Contributor address; City; State; Zip Code 146 18th St New Orleans, LA 70124-1226		\$350.00	<b>!</b> ! !
				(if travel outside of	Texas, complete Schedule T)
	Principal occup Executive As	pation / Job title (See Instructions) sistant	10 Employer (See In Force Multiplier		
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
(	09/11/2014	Contributor address; City; State; Zip Code 146 18th St New Orleans, LA 70124-1226		\$350.00	   
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Manager	ation / Job title (See Instructions)	Employer (See In Hertz	estructions)	
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
(	07/16/2014	Contributor address; City; Slate; Zip Code PO Box 160486 Austin, TX 78716-0486		\$200.00	 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Engineer	ation / Job title (See Instructions)	Employer (See In Self	structions)	
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
(	09/25/2014	Contributor address; City; State; Zip Code PO Box 4023 Austin, TX 78765		\$350.00	 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
C	09/14/2014	Contributor address; City; State; Zip Code 8305 Canola Bnd Austin, TX 78729-6465		\$150.00	
	inharancaeusella			ilf travel enteide ~*	Texas, complete Schedule T}
	Principal occup	ation / Job title (See Instructions)	Employer (See In		Towas, complete achiequie 17

The Instruct	ION GUIDE EXPIAINS how to complete this form.		1 PAGE # Schedule: 22	2/34 Report: 24/58
2 FILER NAME	Casar, Gregorio		3 ACCOUNT # 00000010	(Ethics Commission filers)
4 Date	5 Full name of contributor	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
07/16/2014	6 Contributor address: City; State: Zip Code 1818 Rachel Ln Round Rock, TX 78664-7455		\$350.00	 
			(If travel outside of	Texas, complete Schedule T)
9 Principal occu Real Estate	pation / Job title (See Instructions)	10 Employer (See In Gene Johnson		
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/16/2014	Contributor address; City; State; Zip Code 1818 Rachel Ln Round Rock, TX 78664-7455	••••••	\$350.00	 
				Texas, complete Schedule T)
Branch Mana	pation / Job title (See Instructions) ager	Employer (See In 1st Convenienc		
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable) music for event
09/10/2014	Contributor address; City; State; Zip Code 1215 Delano St. Austin, TX 78721		\$300.00	 
			(If travel outside of	Texas, complete Schedule T)
Principal occup musician	pation / Job title (See instructions)	Employer (See Ins self	structions)	W.A. L.
Date	Full name of contributor □ out-of-state PAC (ID# Neve, Sarah	<del>*</del> )	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/22/2014	Contributor address; City; State; Zip Code 4105 Victory Dr Apt D304 Austin, TX 78704-7572	• • • • • • • • • • • • • • • • • • • •	\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)	
Date	Full name of contributor	<b>f</b> )	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/25/2014	Contributor address; City; State; Zip Code 210 Lavaca St Apt 3005 Austin, TX 78701-4598		\$350.00   	
and the second s			(If travel outside of	Texas, complete Schedule T)
Principal occup Retired MD	ation / Job title (See Instructions)	Employer (See Ins Retired	tructions)	The state of the s

The Instruct	TION GUIDE explains how to complete this form.		1 PAGE # Schedule: 23	3/34 Report: 25/58
2 FILER NAME	Casar, Gregorio		3 ACCOUNT # 00000010	(Ethics Commission filers)
4 Date	5 Full name of contributor 🖾 out-of-state PAC (ID North Central IL Laborers' District Council PAC	0#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
08/27/2014	6 Contributor address; City; State; Zip Code 4208 W Partridge Way Unit 2 Peoria, IL 61615-5650	••••••	\$350.00	 
a Dringing one	Coston / John Wills (Construction)		1	Texas, complete Schedule T)
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See In	istructions)	
Date	Full name of contributor  ut-of-state PAC (ID Parke, Jessica	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/16/2014	Contributor address; City; State; Zip Code 449 Bellemeade Blvd. Gretna, LA 70056-7220		\$350.00	 
				·
Principal occu	pation / Job title (See Instructions)	Employer (See In	.1	Texas, complete Schedule T)
Receptionist		Force Multiplier		
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/20/2014	Contributor address; City; State; Zip Code 2104 Willow St Austin, TX 78702-4550		\$100.00	 
	·		(If travel outside of	Texas, complete Schedule T)
Principal occuj	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/06/2014	Contributor address; City; State; Zip Code 1915 NE 44th St Oklahoma City, OK 73111-6223		\$350.00	
	,		Acommence of the second	
Principal occur	pation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule T)
City Counciln		City of Oklahom		
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/25/2014	Contributor address; City; State; Zip Code 1110 W Oltorf St None		\$350.00	
	Austin, TX 78704-5329			· /
Principal occup	ation / Job title (See Instructions)	Employer (See In:		Texas, complete Schedule T)
Paralegal		Loewy Law Firm		

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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 24	/34 Report: 26/58
2	FILER NAME	Casar, Gregorio		3 ACCOUNT # 00000010	(Ethics Commission filers)
4	Date	5 Full name of contributor	<u> </u>	7 Amount of contribution (S)	8 In-kind contribution description (if applicable)
	09/10/2014	6 Contributor address; City; State; Zip Code 6876 General Diaz St New Orleans, LA 70124-3340	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$350.00	 
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Marketing Ma	ation / Job title (See Instructions) inager	10 Employer (See In Imperial Trading		
	Date	Full name of contributor	1)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/10/2014	Contributor address; City; State; Zip Code 6876 General Diaz St New Orleans, LA 70124-3340		\$350.00	 
				(If travel outside of	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)			Employer (See In	<u> </u>	
	Regional Mar	nager	Force Multiplier	Solutions, Inc.	
	Date	Full name of contributor 🔲 out-of-state PAC (ID# Purgason, A J	<del>/</del> )	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/16/2014	Contributor address; City; State; Zip Code 1403 Northridge Dr Austin, TX 78723-1824		\$350.00	 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Retired	nation / Job title (See Instructions)	Employer (See In Retired	structions)	***************************************
	Date	Full name of contributor	<del>/</del> )	Amount of contribution (\$)	In-kind contribution description (if appticable)
	07/16/2014	Contributor address; City; State; Zip Code 1403 Northridge Dr Austin, TX 78723-1824		\$350.00	 
				/If travel outside of	Texas, complete Schedule T)
$\vdash$	Principal occur	pation / Job title (See Instructions)	Employer (See In	L`	rexas, complete schedule 17
	Retired		Retired		
	Date	Fulf name of contributor	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/13/2014	Contributor address; City; State; Zip Code 5708 Avenue G Austin, TX 78752-4510	, ,	\$350.00	!
					Texas, complete Schedule T)
	Principal occup Attorney	pation / Job title (See Instructions)	Employer (See In American Fede	istructions) tration of Teachers	3

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The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 25/	/34 Report: 27/58
2 FILER NAME	Casar, Gregorio		3 ACCOUNT # 00000010	(Ethics Commission filers)
4 Date	5 Full name of contributor Out-of-state PAC (ID# Quinzi, Paul	<del> </del> )	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
08/13/2014	6 Contributor address; City; State; Zip Code 5708 Avenue G Austin, TX 78752-4510		\$350.00	 
			1	Texas, complete Schedule T)
9 Principal occup Attorney	nation / Job title (See Instructions)	10 Employer (See In Law Office of Pa	structions) aul Quinzi	
Date	Full name of contributor	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/23/2014	Contributor address; City; State; Zip Code 404 W 13th St Austin, TX 78701-1825		\$350.00	<b> </b> 
			(If traval autable	Texas, complete Schedule T)
Dringing access	pation / Job title (See Instructions)	Employer (See In	1	· c.x.a.s, complete schedule I)
Attorney	Serion 7 dob nee (dee mandonons)	Self Employed		
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/21/2014	Contributor address; City; State; Zip Code 1420 Wesimoor Dr Austin, TX 78723-3139		\$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)
08/20/2014	Contributor address; City; State; Zip Code researching		\$100.00	 
Life Control of the C			(If travel outside of	Texas, complete Schedule T)
Principal occup	Deation / Job title (See Instructions)	Emplayer (See In	structions)	
Date	Full name of contributor	· #)	Amount of	In-kind contribution
	Roadman, Charlie		contribution (\$)	description (if applicable)
09/22/2014	Contributor address; City; State; Zip Code 5336 Austral Loop		\$350.00	1
	Austin, TX 78739-1711		115.4	T
Principal com-	pation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule T)
Lawyer	sensor, soo aac (dos mandonons)	Self Employed		Application of the second of t

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The Instruct	ion Guide explains how to complete this form.		1 PAGE # Schedule: 28	5/34 Report: 28/58
2 FILER NAME	Casar, Gregorio		3 ACCOUNT # 00000010	(Ethics Commission filers)
4 Date	5 Full name of contributor	)#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
08/28/2014	6 Contributor address; City; State; Zip Code 4111 Tablerock Dr Austin, TX 78731-1339	.,	\$100.00	1 
			(If travel outside of	Texas, complete Schedule T)
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See I	nstructions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/07/2014	Contributor address; City; State; Zip Code 3609 Vineland Dr Austin, TX 78722-1238		\$100.00	 
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See Ir		reads, complete conteaute 1)
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
0 <b>9/</b> 24/2014	Contributor address; City; State; Zip Code 3609 Vineland Dr Austin, TX 78722-1238	•••••	\$50.00	 
5.5			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	istructions)	
Date	Full name of contributor	<u>;                                    </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/08/2014	Contributor address; City; State; Zip Code 2609 Sherwood Ln Austin, TX 78704-5644		\$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	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/15/2014	Contributor address; City; State; Zip Code 815 Brazos St Ste 534A Austin, TX 78701-2608	• • • • • • • • • • • • • • • • • • • •	\$200.00	
шажене			(If traval outside -13	exas, complete Schedule T)
Principal occupi CEO	ation / Job title (See Instructions)	Employer (See Ins Big Red Dog		exas, complete schedule ()

Sheppard, Jade Chang

Contributor address;

12425 Dorsett Rd Austin, TX 78727-5807

Principal occupation / Job title (See Instructions)

09/17/2014

contribution (\$)

Employer (See Instructions)

\$200.00

#### **POLITICAL CONTRIBUTIONS** SCHEDULE A OTHER THAN PLEDGES OR LOANS The INSTRUCTION GUIDE explains how to complete this form. 1 PAGE# Schedule: 27/34 Report: 29/58 2 FILER NAME Casar, Gregorio 3 ACCOUNT# (Ethics Commission filers) 00000010 Date 5 Full name of contributor ut-of-state PAC (ID# Amount of In-kind contribution Seeber, Brittany contribution (\$) description (if applicable) 6 Contributor address; 09/18/2014 City; State; Zip Code \$350.00 4350 Trinily Mills Rd Apt 9103 Dallas, TX 75287-7038 (If travel outside of Texas, complete Schedule T) 9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Executive Assistant Force Multiplier Solutions, Inc. Date Amount of In-kind contribution contribution (\$) description (if applicable) 08/20/2014 Contributor address; City; State; Zip Code \$300.00 1015 E Yager Ln Unit 92 Austin, TX 78753-7007 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Date Amount of In-kind contribution

Construction			Gideon	•	
Date	Full name of contributor Siff, Ted	☐ out-of-state PAC (ID#	<b>*</b> )	Amount of   contribution (\$)	In-kind contribution description (if applicable)
09/21/2014	Contributor address; 604 W 11th St Austin, TX 78701-2007	City; State; Zip Code	••••••	\$150.00   	
Q-i-a-i-a-I-				<u> </u>	xas, complete Schedule T)
Principal occup	ation / Job title (See Instruction	ins)	Employer (See In	structions)	

City; State: Zip Code

Date Amount of In-kind contribution Siyum, Ababa contribution (\$) description (if applicable) 08/20/2014 Contributor address; City; State; Zip Code \$200.00 13608 Merseyside Dr Pflugerville, TX 78660-8870 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Homemaker

Homemaker

description (if applicable)

(If travel outside of Texas, complete Schedule T)

# **POLITICAL CONTRIBUTIONS**

OTHER	THAN PLEDGES OR LOAN	···		
The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 28/	34 Report: 30/58
FILER NAME	Casar, Gregorio		3 ACCOUNT # 00000010	(Ethics Commission filers)
Date	5 Full name of contributor 🖾 out-of-state PAC (ID# Southern Central IL Laborers' Political League		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
08/18/2014	6 Contributor address; City; State; Zip Code 5100 Laborers Way Marion, IL 62959-7616	, . ,	\$350.00     	
	1		(If travel outside of	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)
07/06/2014	Contributor address; City; State; Zip Code PO Box E The Division VA 2010R 2025		\$100.00	 
	The Plains, VA 20198-0026		(If travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/11/2014	Contributor address; City; State; Zip Code PO Box 5674 Austin, TX 78763-5674		\$100.00	! ! !
•			(if travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See Ir	istructions)	
Date	Full name of contributor	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/27/2014	Contributor address; City; State; Zip Code 7289 Cactus Spine Ln El Paso, TX 79912-1759		\$200.00	! 
	Erraed, INTOOLE FIO		(If travel outside of	Texas, complete Schedule T)
Principal occu Professor	pation / Job title (See Instructions)	Emplayer (See In University of To	nstructions) exas at El Paso	
Date	Full name of contributor	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/10/2014	Contributor address; City; State; Zip Code 27 Meadow Run Round Rock, TX 78664-9618		\$350.00	
	3-1-		(If travel outside of	Texas, complete Schedule T)
Principal occu Administrato	upation / Job title (See Instructions)	Employer (See I TG	nstructions)	or vanish and managed and company of the company of the state of the company of t

# **POLITICAL CONTRIBUTIONS**

	OTHER	THAN PLEDGES OR LOAN	NS		
	The Instruction	אס Guide explains how to complete this form.		1 PAGE # Schedule: 29/	34 Report: 31/58
2	FILER NAME	Casar, Gregorio		3 ACCOUNT# 00000010	(Ethics Commission filers)
4	Date	5 Full name of contributor		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	09/11/2014	6 Contributor address; City; State; Zip Code 2018 General Pershing St New Orleans, LA 70115-5436		\$350.00   	
					Texas, complete Schedule T)
9	Principal occup Homemaker	pation / Job title (See Instructions)	10 Employer (See In Homemaker	structions)	
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
ŝ	09/11/2014	Contributor address; City; State; Zip Code 2018 General Pershing St		\$350.00	
		New Orleans, LA 70115-5436		'	*
				(if travel outside of	Texas, complete Schedule T)
	Principal occup EVP	pation / Job title (See Instructions)	Employer (See In Force Multiplier		
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/16/2014	Contributor address; City; State; Zip Code 16925 Judy Scholl Way Round Rock, TX 78681-5406		\$350.00	 
l				(If travel outside of	Texas, complete Schedule T)
	Principal occup Realtor	pation / Job title (See Instructions)	Employer (See In M.E. Gene John	structions) nson Realtors, Inc	
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/16/2014	Contributor address; City; State; Zip Code 16925 Judy Scholl Way Round Rock, TX 78681-5406		\$350.00	 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Inspector	pation / Job title (See Instructions)	Employer (See In Oncor	structions)	
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/27/2014	Contributor address; City; State; Zip Code 2958 Donnell Dr Round Rock, TX 78664-5709		\$300.00	   
mades All Colleges				(If travel outside of	Texas, complete Schedule T)
The same of the sa	Principal occup Yasay, Inc	pation / Job title (See Instructions)	Employer (See In Owner	structions)	

#### P.O.Box 12070 Austin, Texas 78711-2070 (512)463-5800 **POLITICAL CONTRIBUTIONS** SCHEDULE A OTHER THAN PLEDGES OR LOANS PAGE# The Instruction Guide explains how to complete this form. Schedule: 30/34 Report: 32/58 2 FILER NAME Casar, Gregorio 3 ACCOUNT # (Ethics Commission filers) 00000010 5 Full name of contributor out-of-state PAC (ID# Amount of In-kind contribution Texas State Building Trades COPE contribution (\$) description (if applicable) 09/24/2014 6 "Contributor address; City: State: Zip Code \$250.00 1106 Lavaca St Ste 201 Austin, TX 78701-2171 (If travel outside of Texas, complete Schedule T) 9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Date Amount of In-kind contribution contribution (\$) description (if applicable) 09/14/2014 Contributor address; City; State; Zip Code \$100.00 10 Museum Way Apt 823 Cambridge, MA 02141-1894 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Emplayer (See Instructions) Date Amount of In-kind contribution contribution (\$) description (if applicable) Tucker, Larry 07/16/2014 Contributor address; City; State; Zip Code \$350.00 2210 White Dove Pass Austin, TX 78734-2945 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Consultant LIN Digital Date Full name of contributor ut-of-state PAC (ID# Amount of In-kind contribution Umphress, John contribution (\$) description (if applicable) 09/20/2014 Contributor address; City; State; Zip Code \$200.00 2604 Geraghty Ave Austin, TX 78757-2328 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Conservation Program Specialis Austin Energy Green Building Date Amount of In-kind contribution contribution (\$) description (if applicable) Valera, Jose 09/16/2014 Contributor address: City; State; Zip Code \$200.00 1601 E 5th St Apt 208 Austin, TX 78702-4495 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Attorney Wilson Sonsini Goodrich Rosati

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 31/	/34 Report: 33/58
2	FILER NAME	Casar, Gregorio		3 ACCOUNT# 00000010	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID) Varghese, Lesley	¥)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	09/14/2014	6 Contributor address; City; State; Zip Code 606 W Lynn St Apt 10 Austin, TX 78703-4759		\$200.00	
				<u> </u>	Texas, complete Schedule T)
9	Principal occup Attorney	pation / Job title (See Instructions)	10 Employer (See In Asian American	structions) Resource Center	
	Date	Full name of contributor	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/25/2014	Contributor address; City, State; Zip Code 1407 Ridgemont Dr Austin, TX 78723-2548		\$175.00	
					·
	Deignical seems	ation I (ab title (Can instructions)	Empleyed (Contra	<u> L.:</u>	Texas, complete Schedule T)
	Principal occup	ation / Job title (See instructions)	Employer (See In	structions)	
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (If applicable)
	08/16/2014	Contributor address; City; State; Zip Code 9105 Dona Villa Pl Austin, TX 78726-1728		\$150.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor	#)	Amount of	In-kind contribution
		Wallace, H. Dalton		contribution (\$)	description (if applicable)
	09/16/2014	Contributor address; City; State, Zip Code 9505 Johnny Morris Rd Austin, TX 78724-1527		\$100.00	
		Ausuri, 17.70724-1327			
				L:	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor 🔲 out-of-state PAC (IDF Western Missouri and Kansas Laborers' District (		Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/14/2014	Contributor address; City; State; Zip Code 8500 Ward Pkwy Ste 300		\$350.00	
		Kansas City, MO 64114-2705			
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	

Date   S Full name of contributor   Out-of-state PAC (ID#   )   7 Amount of contribution (S)   8 description (if application of the property					
2 FILER NAME Casar, Gregorio  4 Date   5 Full name of contributor   out-of-state PAC (ID#   ) / Amount of cantribution (if applica scription (if applica s	The Instruct	TION GUIDE explains how to complete this form.		1	2/34 Report: 34/58
Williams, Allan	2 FILER NAME	Casar, Gregorio		3 ACCOUNT#	(Ethics Commission filers)
2400 Camino Alto Austin, TX 78746-2407    Ift travel outside of Texas, complete Schedule 1   Principal occupation / Job title (See Instructions)	4 Date		#)		8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)	09/18/2014	2400 Camino Alto		\$100.00	1 1 1
Date   Full name of contributor				(If travel outside of	Texas, complete Schedule T)
Woldegebriel, Meserete	9 Principal occu	pation / Job title (See Instructions)	10 Employer (See In	nstructions)	
Second	Dale		<del>1</del> )		In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)  Date  Full name of contributor	08/20/2014	941 Hesters Crossing Rd Apt 2702		\$300.00	!   
Date   Full name of contributor   out-of-state PAC (ID#		177552		(If travel outside of	Texas, complete Schedule T)
Wolf, Linda  Contribution (\$)			structions)	***************************************	
10301 River Plantation Dr Austin, TX 78747-1130    Community volunteer   Community volunteer   Contributor   Contributor   Contribution (\$)   Contribution (\$)   Contribution (\$)   Contributor	Date		<del>/</del> )		In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) community volunteer    Date	09/23/2014	10301 River Plantation Dr		\$350.00	 
Principal occupation / Job title (See Instructions) community volunteer    Date				(If travel outside of	Texas, complete Schedule T)
Yancy, Howard  O7/28/2014  Contributor address; City; State; Zip Code 100 Skyline Dr West Lake Hills, TX 78746-3609  Principal occupation / Job title (See Instructions) Employer (See Instructions) Zydeco Development  Date Full name of contributor Out-of-state PAC (ID# ) Amount of Contribution (\$) In-kind contribution (\$) description (if applications) application (\$) Amount of Contribution (\$) description (if applications) application (\$) Amount of Contribution (\$) Amount of Contribution (\$) description (if applications) application (\$) Amount of Contribution (\$) Amount of Contribut				1	
100 Skyline Dr   West Lake Hills, TX 78746-3609   (If travel outside of Texas, complete Schedule T   Principal occupation / Job title (See Instructions)   Employer (See Instructions)   Zydeco Development	Date		)		In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Real Estate  Date  Full name of contributor Yancy, Mary  Date  O7/09/2014  Contributor address; City; State; Zip Code  Employer (See Instructions) Zydeco Development  Amount of contribution (\$) In-kind contribution description (if applications)  Amount of contribution (\$) description (if applications)	07/28/2014	100 Skyline Dr		\$350.00	 
Real Estate  Zydeco Development  Date  Full name of contributor   out-of-state PAC (ID#)   Amount of contribution (\$)   description (if applicate to the contribution (\$)   out-of-state PAC (ID#)   Amount of contribution (\$)   description (if applicate to the contribution (\$)   out-of-state PAC (ID#)   Amount of contribution (\$)   description (if applicate to the contribution (\$)   out-of-state PAC (ID#)   Amount of contribution (\$)   out-of-state PAC (ID#)   Out-of-state PAC (ID#					Texas, complete Schedule T)
Yancy, Mary contribution (\$) description (if applicate 07/09/2014 Contributor address; City; State; Zip Code \$350.00		pation / Job title (See Instructions)			
	Date		)		In-kind contribution description (if applicable)
100 Skyline Dr West Lake Hills, TX 78746-3609	07/09/2014	100 Skyline Dr		\$350.00   	
Principal occupation / Job title (See Instructions) Psychologist  (If travel outside of Texas, complete Schedule T)  Employer (See Instructions) Self		pation / Job title (See Instructions)			Texas, complete Schedule T)

The Instruc	пом Guide explains how to complete this form.		1 PAGE # Schedule: 33	3/34 Report: 35/58
2 FILER NAME	Casar, Gregorio		3 ACCOUNT# 00000010	(Ethics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID. Yedeme, Tigabu	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
08/20/2014	6 Contributor address; City; State; Zip Code 941 Hesters Crossing Rd Apt 2702 Round Rock, TX 78681-7832	• • • • • • • • • • • • • • • • • • • •	\$300.00	 
9 Principal occi Driver	upation / Job title (See Instructions)	10 Employer (See In Lonestar Cab		Texas, complete Schedule T
Date	Full name of contributor  ut-of-state PAC (ID: Yildirim, Aydin	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/25/2014	Contributor address; City; State; Zip Code 1831 Wells Branch Pkwy Apt 211 Austin, TX 78728-6907		\$75.00	   
	703811, 1770720-0307		(if travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/20/2014	Contributor address; City; State; Zip Code 13608 Merseyside Dr Pflugerville, TX 78660-8870	• • • • • • • • • • • • • • • • • • • •	\$200.00	 
			1	Texas, complete Schedule T)
Principal occu Driver	pation / Job title (See Instructions)	Employer (See In Lonestar Cab	structions)	
Date	Full name of contributor ☐ out-of-state PAC (ID# Young, Doug	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/18/2014	Contributor address; City; State; Zip Code 2904 Kassarine Pass Austin, TX 78704-4629		\$200.00	  - 
and the second s			<u> </u>	Texas, complete Schedule T)
Principal occu Attorney	pation / Job title (See Instructions)	Employer (See In Scanlan Beattie		
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/20/2014	Contributor address; City; State; Zip Code 17205 Tobermory Dr Pflugerville, TX 78660-1726		\$300.00	
				Texas, complete Schedule T)
Principal occu Driver	pation / Job title (See Instructions)	Employer (See In: Lonestar Cab	structions)	

		CAL CONTRIBUTIONS THAN PLEDGES OR LOANS	SCHEDULE A
	The Instruction	אס Guide explains how to complete this form.	1 PAGE # Schedule: 34/34 Report: 36/58
2	FILER NAME	Casar, Gregorio	3 ACCOUNT # (Ethics Commission filers) 00000010
4	Date	5 Full name of contributor  ul-of-state PAC (ID#)  Zoranic, Aleksandar	7 Amount of 8 In-kind contribution contribution (\$) description (if applicable)
	09/19/2014	6 Contributor address; City; State; Zip Code 1135 Burdette St New Orleans, LA 70118-3972	\$350.00 I

			(If travel outside of Texas, complete Schedule T)
9	Principal occupation / Job title (See Instructions) Research and Development	10 Employer (See In Force Multiplier	

#### (If travel outside of Texas, complete Schedule T) OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 07/10/2014 Facebook Amount (\$) Payee address City; State; Zip Code 1601 S. California Ave. \$25.15 Palo Alto, CA 94304 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Political online advertising Advertising Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Electronic Filing Version 3.4.6

#### SCHEDULE F POLITICAL EXPENDITURES **EXPENDITURE CATEGORIES** Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Advertising Expense Accounting/Banking Consulting Expense Loan Repayment/Reimbursement Gifts/Awards/Memorial Expense Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Legal Services Food/Beverage Expense Polling Expense Printing Expense Travel Out Of District Event Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 3 ACCOUNT # (TEC filers) FILER NAME 1 PAGE# Casar, Gregorio 00000010 Schedule: 3/19 Report: 40/58 5 Payee name 4 Date 07/14/2014 Facebook Payee address 6 Amount (\$) City; State; Zip Code 1601 S. California Ave. \$50.31 Palo Alto, CA 94304 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) Political online advertising **PURPOSE** Advertising Expense OF **EXPENDITURE** Check if Austin, TX, officeholder living expense g Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Facebook 08/01/2014 Amount (\$) Payee address City; State; Zip Code 1601 S. California Ave. \$12.23 Palo Alto, CA 94304 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description Political online advertising **PURPOSE** Advertising Expense EXPENDITURE Check if Austin, TX, officeholder living expense Office sought: Office held: Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH Payee name Date 07/03/2014 First Data Payee address City; State; Zip Code Amount (\$) 5565 Glenridge Connector NE \$164.95 Atlanta, GA 30342 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description PURPOSE credit card processing fees Accounting/Banking OF EXPENDITURE Check if Austin, TX, officeholder living expense Office held: Complete ONLY if Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH Payee name Date First Data 07/03/2014 Payee address City; State; Zip Code Amount (\$) 5565 Glenridge Connector NE Atlanta, GA 30342 \$292.87 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description credit card processing fees **PURPOSE** Accounting/Banking OF EXPENDITURE Check if Austin, TX, officeholder living expense Office held: Candidate / Officeholder name Office sought: Complete ONLY if direct expenditure to benefit C/OH

#### POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Advertising Expense Gifts/Awards/Memorial Expense Accounting/Banking Consulting Expense Legal Services Food/Beverage Expense Travel In District Travel Out Of District Polling Expense Event Expense OTHER (enter a category not listed above) Printing Expense Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. 2 FILER NAME 3 ACCOUNT # (TEC filers) 1 PAGE# Casar, Gregorio 00000010 Schedule: 4/19 Report: 41/58 A Date 5 Payee name First Data 07/03/2014 6 Amount (\$) Payee address City; State; Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342 \$309.33 (a) Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) (b) Description 8 **PURPOSE** credit card processing fees Accounting/Banking EXPENDITURE Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office held: Office sought: direct expenditure to benefit C/OH Date Payee name 08/04/2014 First Data Amount (\$) Payee address City; State; Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342 \$333.47 Description (if travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) **PURPOSE** credit card processing fees Accounting/Banking OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 08/04/2014 First Data Payee address Amount (\$) City; State; Zip Code 5565 Glenridge Connector NE \$35.20 Atlanta, GA 30342 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** credit card processing fees Accounting/Banking OF EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought: Office held: Complete ONLY if direct expenditu Date Payee name First Data 08/04/2014 City; State; Zip Code Amount (\$) Payee address 5565 Glenridge Connector NE Atlanta, GA 30342 \$105.56 Description Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) **PURPOSE** credit card processing fees Accounting/Banking EXPENDITURE Check if Austin, TX, officeholder living expense Office held: Candidate / Officeholder name Office sought: Complete ONLY if direct expenditure to benefit C/OH

#### **POLITICAL EXPENDITURES** SCHEDULE F **EXPENDITURE CATEGORIES** Advertising Expense Accounting/Banking Consulting Expense Event Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Loan Repayment/Reimbursement Gifts/Awards/Memorial Expense Legal Services Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Food/Beverage Expense Polling Expense Printing Expense Travel Out Of District Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. 2 FILER NAME 3 ACCOUNT # (TEC filers) 1 PAGE # Casar, Gregorio Schedule: 5/19 Report: 42/58 00000010 5 Payee name 4 Date 09/03/2014 First Data 6 Amount (\$) Payee address City; State; Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342 \$61.68 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) PURPOSE credit card processing fees Accounting/Banking OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought: Office held: Complete ONLY if direct expenditure to benefit C/OH Date Payee name 09/03/2014 First Data Amount (\$) Payee address City; State; Zip Code 5565 Glenridge Connector NE \$128.85 Atlanta, GA 30342 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** credit card processing fees Accounting/Banking OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Payee name Date First Data 09/03/2014 Amount (\$) Payee address City; State; Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342 \$24.80 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) **PURPOSE** credit card processing fees Accounting/Banking **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office held: Office sought: Complete ONLY if direct expenditure to benefit C/OH Date Payee name Frankel, Hannah 08/19/2014 Amount (\$) Payee address City; State; Zip Code 7910 Gault St. #111 \$76.27 Austin, TX 78757 Description Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) **PURPOSE** contract labor Salaries/Wages/Contract Labor EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH

SCHEDULE F

Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ing Legal Services Solicitation/Fundi	Contract Labor raising Expense Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Rental Expense OTHER (enter a category not listed above)
1 PAGE# Schedule: 6/19 R	2 FILER NAME Casar, Gregorio	3 ACCOUNT # (TEC filers) 00000010
4 Date 09/04/2014	5 Payee name Frankel, Hannah	
6 Amount (\$) \$206.25	7 Payee address City; State; Zip Code 7910 Gault St. #111 Austin, TX 78757	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (II travel outside of Texas, complete Schedule T) contract labor  Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
09/19/2014	Frankel, Hannah	
Amount (\$) \$165.92	Payee address City; State; Zip Code 7910 Gault St. #111 Austin, TX 78757	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel cutside of Texas, complete Schedule T) Contract labor
Complete ONLY if direct expenditure to be nefit C/OH	Candidate / Officeholder name	Office sought: Office held:
direct expenditure	Candidate / Officeholder name Payee name	
direct expenditure to be nefit C/OH	Payee name Kane, Tania	
direct expenditure to be nefit C/OH Date	Payee name	
direct expenditure to benefit C/OH  Date 08/14/2014  Amount (\$)	Payee name Kane, Tania Payee address City; State; Zip Code 1206 East 30th Street	Office sought: Office held:  Description (If travel outside of Texas, complete Schedule T)  contract labor
direct expenditure to benefit C/OH  Date 08/14/2014  Amount (\$) \$100.00  PURPOSE OF	Payee name Kane, Tania Payee address City; State, Zip Code 1206 East 30th Street Austin, TX 78722  Category (See Categories listed at the top of this schedule)	Office sought: Office held:  Description (If travel outside of Texas, complete Schedule T)
direct expenditure to benefit C/OH  Date 08/14/2014  Amount (\$) \$100.00  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date	Payee name Kane, Tania Payee address City; State; Zip Code 1206 East 30th Street Austin, TX 78722  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Office sought: Office held:  Description (If travel outside of Texas, complete Schedule T) Contract labor  Check if Austin, TX, officeholder living expense
direct expenditure to benefit C/OH  Date 08/14/2014  Amount (\$) \$100.00  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH	Payee name Kane, Tania  Payee address City; State; Zip Code 1206 East 30th Street Austin, TX 78722  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Candidate / Officeholder name	Office sought: Office held:  Description (If travel outside of Texas, complete Schedule T) Contract labor  Check if Austin, TX, officeholder living expense
direct expenditure to benefit C/OH  Date 08/14/2014  Amount (\$) \$100.00  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 08/29/2014	Payee name Kane, Tania  Payee address City; State; Zip Code 1206 East 30th Street Austin, TX 78722  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Candidate / Officeholder name  Payee name Kane, Tania	Office sought: Office held:  Description (If travel outside of Texas, complete Schedule T) Contract labor  Check if Austin, TX, officeholder living expense
direct expenditure to benefit C/OH  Date 08/14/2014  Amount (\$) \$100.00  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 08/29/2014  Amount (\$)	Payee name Kane, Tania  Payee address City; State; Zip Code 1206 East 30th Street Austin, TX 78722  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Candidate / Officeholder name  Payee name Kane, Tania  Payee address City; State; Zip Code 1206 East 30th Street	Office sought: Office held:  Description (If travel outside of Texas, complete Schedule T) Contract labor  Check if Austin, TX, officeholder living expense

Description Printing

Office sought:

Category (See Categories listed at the top of this schedule)

Printing Expense

Candidate / Officeholder name

**PURPOSE** 

OF EXPENDITURE

Complete ONLY if

direct expenditure to benefit C/OH

Austin, Texas 78711-2070

POLITIC	AL EXPENDITURES		SCHEDULE F
		TURE CATEGORIES	
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	nse 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 E explains how to complete this f	Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) orm.
1 PAGE# Schedule: 8/19 F	2 FILER NAME Casar, Gregorio		3 ACCOUNT# (TEC filers) 00000010
4 Date	5 Payee name		
09/25/2014	Kelly Graphics	n Codo	
6 Amount (\$) \$3,023.63	7 Payee address City, State; Zi 1409 Quaker Ridge Austin, TX 78746	p Code	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this Printing Expense	s schedule) (b) Description Printing	(If travel outside of Texas, complete Schedule T)
EXPENDITURE		Chack If Aug	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to be nefit C/OH	Candidate / Officeholder name	Office so	
Date	Payee name		
07/01/2014	Lawler, John		
Amount (\$) \$1,500.00	Payee address City; State; Zi 1902 Robbins Place Austin, TX 78705	p Code	
PURPOSE OF	Category (See Categories listed at the top of this Salaries/Wages/Contract Labor	s schedule) Description Salary	(If travel outside of Texas, complete Schedule T)
EXPENDITURE		Check if Aust	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office so	
Date 07/15/2014	Payee name Lawler, John		
Amount (\$) \$1,500.00	Payee address City; State; Zi 1902 Robbins Place Austin, TX 78705	p Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of thi Salaries/Wages/Contract Labor	Salary	(If travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Check if Aust	in, TX, officeholder living expense  ought: Office held:
Date 07/31/2014	Payee name Lawler, John		
Amount (\$) \$1,500.00	Payee address City; State; Zi 1902 Robbins Place Austin, TX 78705	ip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of thi Salaries/Wages/Contract Labor	Salary	(If travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office so	

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#### POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Advertising Expense Gifts/Awards/Memorial Expense Accounting/Banking Consulting Expense Legal Services Food/Beverage Expense Travel In District Travel Out Of District Polling Expense Printing Expense Event Expense Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. 3 ACCOUNT # (TEC filers) 1 PAGE# FILER NAME Casar, Gregorio 00000010 Schedule: 9/19 Report: 46/58 5 Payee name Date 08/14/2014 Lawler, John 6 Amount (\$) Payee address City; State; Zip Code 1902 Robbins Place \$1,500.00 Austin, TX 78705 (b) Description (a) Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) 8 **PURPOSE** Salary Salaries/Wages/Contract Labor EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought: Office held: 9 Complete ONLY if direct expenditure to benefit C/OH Payee name Date Lawler, John 08/29/2014 Amount (\$) Payee address City; State; Zip Code 1902 Robbins Place \$1,500.00 Austin, TX 78705 Description (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Salary **PURPOSE** Salaries/Wages/Contract Labor OF EXPENDITURE Check if Austin, TX, officeholder living expense Office held: Complete ONLY if Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH Date Payee name Lawler, John 09/15/2014 Payee address City: State: Zip Code Amount (\$) \$1,500.00 1902 Robbins Place Austin, TX 78705 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description Salary **PURPOSE** Salaries/Wages/Contract Labor OF EXPENDITURE Check if Austin, TX, officeholder living expense Office held: Office sought: Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH Date Payee name 08/15/2014 Littlefield Consulting Amount (\$) Payee address City; State; Zip Code P.O. Box 90591 \$200.00 Austin, TX 78709 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description Consulting **PURPOSE** Consulting Expense OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Office sought: Office held: Complete ONLY if Candidate / Officeholder name direct expenditure to benefit C/OH

#### POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Potitical Committee OTHER (enter a category not listed above) Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Gifts/Awards/Memorial Expense Advertising Expense Accounting/Banking Consulting Expense Event Expense Legal Services Food/Beverage Expense Polling Expense Travel in District Travel Out Of District Office Overhead/Rental Expense Fees Printing Expense The INSTRUCTION GUIDE explains how to complete this form. 3 ACCOUNT # (TEC filers) 1 PAGE# 2 FILER NAME Casar, Gregorio 00000010 Schedule: 10/19 Report: 47/58 4 Date 5 Payee name Office Depot 07/16/2014 Amount (\$) Pavee address City; State; Zip Code 2620 W Anderson Ln \$17.31 Austin, TX 78757 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) office supplies PURPOSE Office Overhead/Rental Expense EXPENDITURE Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Office Depot 07/29/2014 City; State; Zip Code Amount (\$) Payee address 2620 W Anderson Ln \$70.32 Austin, TX 78757 Description (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) office supplies PURPOSE Office Overhead/Rental Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Payee name Date 08/22/2014 Office Depot Pavee address City: State: Zip Code Amount (\$) 2620 W Anderson Ln \$11.90 Austin, TX 78757 Description (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) office supplies PURPOSE Office Overhead/Rental Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Office held: Candidate / Officeholder name Office sought: Complete ONLY if direct expenditure to benefit C/OH Date Payee name Office Depot 09/02/2014 Payee address City; State; Zip Code Amount (\$) 2620 W Anderson Ln \$34.63 Austin, TX 78757 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) office supplies **PURPOSE** Office Overhead/Rental Expense EXPENDITURE Check if Austin, TX, officeholder living expense Office sought: Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH

	POLITIC	AL EXPENDITURES	SCHEDULE F
	Advertising Exper Accounting/Banki Consulting Expen Event Expense Fees	ng Legal Services Solicitation/Fundr	Contract Labor alsing Expense alsing Expense Contributions/Oonalions Made By Candidate/Officeholder/Political Committee Contributions/Oonalions Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)  v to complete this form.
	1 PAGE# Schedule: 11/19 I	2 FILER NAME Casar, Gregorio	3 ACCOUNT # (TEC filers) 00000010
٠	4 Date	5 Payee name	
•	09/17/2014 6 Amount (\$) \$78.98	Office Depot  7 Payee address City; State; Zlp Code 2620 W Anderson Ln Austin, TX 78757	
1	8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description (If travel outside of Texas, complete Schedule T) office supplies
			Check if Austin, TX, officeholder living expense Office sought: Office held:
	9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
	Date	Payee name	
	09/22/2014	Office Depot  Pavee address City; State; Zip Code	
	Amount (\$) \$59.51	Payee address City; State; Zip Code 2620 W Anderson Ln Austin, TX 78757	
	PURPOSE OF	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T)  office supplies
	EXPENDITURE		Check if Austin, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
ĺ	Date	Payee name	
ŀ	07/03/2014	Starratt, Brandon Payee address City: State: Zip Code	
	Amount (\$) \$176.00	Payee address City; State; Zip Gode 1930 W Rundberg Apt 1118 Austin, TX 78758	
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) contract labor
The state of the s	Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
-	Date	Payee name	
	07/15/2014	Starratt, Brandon Pavee address City; State; Zip Code	
The second name of the latest na	Amount (\$) \$242.00	100014170	
-	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor
	Complete ONLY if direct expenditure to be nefit C/OH	Candidate / Officeholder name	Office sought: Office held:

**PURPOSE** 

EXPENDITURE

#### (512)463-5800 TDD 1-800-735-2989 Austin, Texas 78711-2070 Texas Ethics Commission P.O.Box 12070 SCHEDULE F POLITICAL EXPENDITURES **EXPENDITURE CATEGORIES** Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Salaries/Wages/Contract Labor Solicitation/Fundralsing Expense Gifts/Awards/Memorial Expense Advertising Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense Accounting/Banking Consulting Expense Travel Out Of District Event Expense OTHER (enter a category not listed above) Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. 3 ACCOUNT # (TEC filers) 2 FILER NAME 1 PAGE # 00000010 Casar, Gregorio Schedule: 12/19 Report: 49/58 5 Payee name 4 Date Starratt, Brandon 07/31/2014 City; State; Zip Code 6 Amount (\$) Payee address 1930 W Rundberg Apt 1118 \$193.05 Austin, TX 78758 (If travel outside of Texas, complete Schedule T) (b) Description (a) Category (See Categories listed at the top of this schedule) 8 Contract labor PURPOSE Printing Expense EXPENDITURE Check if Austin, TX, officeholder living expense Office held: Office sought: Candidate / Officeholder name 9 Complete ONLY if direct expenditure to benefit C/OH Pavee name Date Starratt, Brandon 08/14/2014 City; State; Zip Code Payee address Amount (\$) 1930 W Rundberg Apt 1118 \$392.88 Austin, TX 78758 (If travel outside of Texas, complete Schedule T) Description Category (See Categories listed at the top of this schedule) Contract labor PURPOSE Salaries/Wages/Contract Labor EXPENDITURE Check if Austin, TX, officeholder living expense Office sought: Complete ONLY if Candidate / Officeholder name direct expenditure to benefit C/OH Payee name Date Starratt, Brandon 09/01/2014 City; State; Zip Code Payee address Amount (\$) 1930 W Rundberg Apt 1118 Austin, TX 78758 \$251.72

EXPENDITURE		Check if Austin, TX, officehole	der living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 09/15/2014	Payee name Starratt, Brandon		
Amount (\$) \$360.03	Payee address City; State; Zip Code 1930 W Rundberg Apt 1118 Austin, TX 78758		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outsix Contract labor  Check if Austin, TX, officeho	de of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:  Electronic Filing Version 3.4
<u>L.,</u>			was a second and a second a second and a second a second and a second a second and a second and a second and

Category (See Categories listed at the top of this schedule)

Salaries/Wages/Contract Labor

Description

Contract labor

(If travel outside of Texas, complete Schedule T)

to benefit C/OH

#### SCHEDULE F POLITICAL EXPENDITURES **EXPENDITURE CATEGORIES** Loan Repayment/Reimbursement Transponation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Ad vertising Expense Accounting/Banking Consulting Expense Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Travel In District Travel Out Of District Office Overhead/Rental Expense Event Expense Fees Polking Expense Printing Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form 3 ACCOUNT # (TEC filers) 2 FILER NAME 1 PAGE# 00000010 Casar, Gregorio Schedule: 13/19 Report: 50/58 4 Date 5 Payee name Susan Harry Consulting, LLC 07/01/2014 City; State; Zip Code Payee address 6 Amount (\$) P.O. Box 301074 \$1,400.00 Austin, TX 78703 (If travel outside of Texas, complete Schedule T) (b) Description (a) Category (See Categories listed at the top of this schedule) Fundraising & compliance consulting PURPOSE Consulting Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Office held: Office sought: Candidate / Officeholder name 9 Complete ONLY if direct expenditure to be nefit C/OH Date Payee name Susan Harry Consulting, LLC 08/06/2014 City; State; Zip Code Payee address Amount (S) P.O. Box 301074 Austin, TX 78703 \$1,500.00 Description (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Fundraising & compliance consulting **PURPOSE** Consulting Expense EXPENDITURE Check if Austin, TX, officeholder living expense Office sought: Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH Date Pavee name Susan Harry Consulting, LLC 09/01/2014 City: State: Zip Code Payee address Amount (\$) P.O. Box 301074 \$575.00 Austin, TX 78703 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description Compliance consulting **PURPOSE** Consulting Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Office held: Office sought: Complete ONLY if Candidate / Officeholder name direct expenditure to benefit C/OH Date Payee name Thompson & Knight, LLP 09/09/2014 City; State; Zip Code Payee address Amount (\$) PO Box 660684 \$890.40 Dallas, TX 75266 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description legal fees regarding compliance **PURPOSE** Legal Services OF EXPENDITURE Check if Austin, TX, officeholder living expense Office held: Office sought: Candidate / Officeholder name Complete ONLY if direct expenditure

#### Austin, Texas 78711-2070 P.O.Box 12070 Texas Ethics Commission SCHEDULE F **POLITICAL EXPENDITURES EXPENDITURE CATEGORIES** Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Loan Repayment/Reimbursement Transportation Equipment & Related Expense Ad vertising Expense Accounting/Banking Consulting Expense Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Travel Out Of District Office Overhead/Rental Expense Polling Expense Event Expense Printing Expense The Instruction Guide explains how to complete this form. 3 ACCOUNT # (TEC filers) 2 FILER NAME 1 PAGE# 00000010 Casar, Gregorio Schedule: 14/19 Report: 51/58 5 Payee name 4 Date Treiber, Andre 07/01/2014 City; State; Zip Code 6 Amount (\$) Payee address 1826 Pinewood Ct. \$200.00 Sugari Land, TX 77498 (If travel outside of Texas, complete Schedule T) (b) Description (a) Category (See Categories listed at the top of this schedule) contract labor PURPOSE Salaries/Wages/Contract Labor OF EXPENDITURE Check if Austin, TX, officeholder living expense Office held: Office sought: Candidate / Officeholder name 9 Complete ONLY if direct expenditure to benefit C/OH Payee name Date Treiber, Andre 07/21/2014 City; State; Zip Code Amount (\$) Payee address 1826 Pinewood Ct. \$200.00 Sugari Land, TX 77498 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description contract labor **PURPOSE** Salaries/Wages/Contract Labor OF EXPENDITURE Check if Austin, TX, officeholder living expense Office held: Office sought: Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH Payee name Date USPS 07/15/2014 Payee address City; State; Zip Code Amount (\$) 7700 Northcross Dr. \$7.56 Austin, TX 78757 Description (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) PURPOSE postage Printing Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Office held: Office sought: Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH Date Payee name USPS 07/22/2014 Payee address City; State; Zip Code Amount (\$) 7700 Northcross Dr. \$10.57 Austin, TX 78757 (If travel outside of Texas, complete Schedule T) Description Category (See Categories listed at the top of this schedule) postage **PURPOSE** Printing Expense EXPENDITURE

Candidate / Officeholder name

Complete ONLY if direct expenditure to benefit C/OH

Office held:

Check if Austin, TX, officeholder living expense

Office sought:

direct expenditure to benefit C/OH

#### Austin, Texas 78711-2070 Texas Ethics Commission P.O.Box 12070 SCHEDULE F POLITICAL EXPENDITURES **EXPENDITURE CATEGORIES** Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Salaries/Wages/Contract Labor Gifts/Awards/Memorial Expense Advertising Expense Solicitation/Fundraising Expense Travel in District Legal Services Food/Beverage Expense Polling Expense Accounting/Banking Consulting Expense Travel Out Of District Office Overhead/Rental Expense Event Expense Printing Expense The INSTRUCTION GUIDE explains how to complete this form. 3 ACCOUNT # (TEC filers) FILER NAME 1 PAGE# Casar, Gregorio 00000010 Schedule: 15/19 Report: 52/58 Payee name 4 Date USPS 07/29/2014 Payee address City; State; Zip Code 6 Amount (\$) 7700 Northcross Dr. \$612.50 Austin, TX 78757 (If travel outside of Texas, complete Schedule T) (b) Description (a) Category (See Categories listed at the top of this schedule) 8 postage PURPOSE **Printing Expense** OF EXPENDITURE Check if Austin, TX, officeholder living expense Office held: Office sought: Candidate / Officeholder name 9 Complete ONLY If direct expenditure to benefit C/OH Payee name Date **USPS** 08/12/2014 City; State; Zip Code Amount (\$) Payee address 7700 Northcross Dr. Austin, TX 78757 \$21.00 Description (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) postage PURPOSE Printing Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Office held: Office sought: Complete ONLY if Candidate / Officeholder name direct expenditure to benefit C/OH Payee name Date USPS 08/13/2014 City; State; Zip Code Payee address Amount (\$) 7700 Northcross Dr. \$12.24 Austin, TX 78757 (If travel outside of Texas, complete Schedule T) Description Category (See Categories tisted at the top of this schedule) postage **PURPOSE** Printing Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Office held: Office sought: Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH Payee name Date USPS 08/20/2014 City; State; Payee address Zip Code Amount (S) 7700 Northcross Dr. \$11.90 Austin, TX 78757 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description postage **PURPOSE** Printing Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Office held: Office sought: Complete ONLY if Candidate / Officeholder name

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#### POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Advertising Expense Accounting/Banking Consulting Expense Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense Travel Out Of District Office Overhead/Rental Expense Event Expense OTHER (enter a category not listed above) Fees Printing Expense The Instruction Guide explains how to complete this form. 3 ACCOUNT # (TEC filers) 1 PAGE# FILER NAME 2 0000010 Casar, Gregorio Schedule: 16/19 Report: 53/58 5 Payee name A Date **USPS** 08/21/2014 City; State; Zip Code Amount (\$) Payee address 7700 Northcross Dr. \$13.60 Austin, TX 78757 (b) Description (If travel outside of Texas, complete Schedule T) (a) Category (See Categories listed at the top of this schedule) postage **PURPOSE Printing Expense** OF EXPENDITURE Check if Austin, TX, officeholder living expense 9 Complete ONLY if Office sought: Office held: Candidate / Officeholder name direct expenditure to benefit C/OH Date Payee name USPS 09/03/2014 City; State; Zip Code Payee address Amount (\$) 7700 Northcross Dr. \$49.30 Austin, TX 78757 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description PURPOSE postage Printing Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Office held: Office sought: Complete ONLY if Candidate / Officeholder name direct expenditure to be nefit C/OH Date Payee name **USPS** 09/04/2014 Payee address City: State: Zip Code Amount (\$) 7700 Northcross Dr. \$9.80 Austin, TX 78757 (If travel outside of Texas, complete Schedule T) Description Category (See Categories listed at the top of this schedule) PURPOSE postage Printing Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Office held: Office sought: Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH Date Payee name **USPS** 09/15/2014 City; State; Zip Code Amount (\$) Payee address 7700 Northcross Dr. \$29.58 Austin, TX 78757 (If travel outside of Texas, complete Schedule T) Description Category (See Categories listed at the top of this schedule) postage **PURPOSE** Printing Expense OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Office held: Complete ONLY if Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH

Electronic Filing Version 3.4.6

#### POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Salaries/Wages/Contract Labor Solicitation/Fundralsing Expense Loan Repayment/Reimbursement Gifts/Awards/Memorial Expense Advertising Expense Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Accounting/Banking Consulting Expense Legal Services Food/Beverage Expense Travel In District Travel Out Of District Office Overhead/Rental Expense Polling Expense Event Expense 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# 00000010 Casar, Gregorio Schedule: 17/19 Report: 54/58 4 Date 5 Payee name **USPS** 09/15/2014 Payee address City; State; Zip Code Amount (\$) 7700 Northcross Dr. \$1.02 Austin, TX 78757 (b) Description (If travel outside of Texas, complete Schedule T) (a) Category (See Categories listed at the top of this schedule) 8 **PURPOSE** postage Printing Expense EXPENDITURE Check if Austin, TX, officeholder living expense Office held: Candidate / Officeholder name Office sought: Complete ONLY if direct expenditure to benefit C/OH Date Payee name Worley Printing 08/20/2014 Amount (\$) Payee address City; State; Zip Code 3217 North IH 35 \$186.19 Austin, TX 78722 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description printing PURPOSE Printing Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Office held: Complete ONLY if Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH Payee name Date Worley Printing 09/19/2014 Pavee address City: State: Zip Code Amount (\$) 3217 North IH 35 \$177.53 Austin, TX 78722 (If travel outside of Texas, complete Schedule T) Description Category (See Categories listed at the top of this schedule) printing **PURPOSE** Printing Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Office held: Office sought: Candidate / Officeholder name Complete ONLY If direct expenditure to benefit C/OH Date Payee name Yancy, Max 07/01/2014 Payee address City; State; Zip Code Amount (\$) 2409 East 9th St.11 \$100.00 Austin, TX 78702 (If travel outside of Texas, complete Schedule T) Description Category (See Categories listed at the top of this schedule) fellow stipend **PURPOSE** Salaries/Wages/Contract Labor EXPENDITURE Check if Austin, TX, officeholder living expense Office sought: Office held: Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH

SCHEDULE F

	i Omilio				
	Ad vertising Expen Accounting/Bankir Consulting Expense Event Expense Fees	se Gifts/Awards/Memorial Expense S ng Legal Services S se Food/Beverage Expense T Polling Expense T	URE CATEGORIE alaries/Wages/Contract oplicitation/Fundraising E ravel In District ravel Out Of District optimized to be addressed to be explains how to co	Labor Loan Repaym xpense Transportation Contributions Candidate. Expense OTHER (enter	nent/Reimbursement n Equipment & Related Expense //Donations Made By //Officeholder/Political Committee or a category not listed above)
1	PAGE#	2 FILER NAME			3 ACCOUNT # (TEC filers)
-	hed ule: 18/19 f	Report: 55/58 Casar, Gregorio			00000010
	Date 07/15/2014	5 Payee name Yancy, Max			
6	Amount (\$) \$200.00	7 Payee address City; State; Zig 2409 East 9th St.11 Austin, TX 78702	o Code		
8	PU RPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Salaries/Wages/Contract Labor	s schedule) (b	fellow stipend	le of Texas, complete Schedule T)
				Check if Austin, TX, officehol Office sought:	Office held:
_	Complete ONLY if direct expenditure to be nefit C/OH	Candidate / Officeholder name		Oince sought.	
	Date 07/31/2014	Payee name Yancy, Max			
<u> </u>	Amount (\$)	Payee address City; State; Zi	p Code		
	\$200.00	2409 East 9th St.11 Austin, TX 78702			
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of thi Salaries/Wages/Contract Labor	s schedule)	Description (If travel outsi fellow stipend	de of Texas, complete Schedule T)
-	Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
F	Date	Payee name			
	08/14/2014	Yancy, Max		4	
	Amount (\$)	1 44,00 002.000	ip Code		
	\$200.00	2409 East 9th St.11 Austin, TX 78702			
	PURPOSE OF	Category (See Categories listed at the top of th Salaries/Wages/Contract Labor	is schedule)	Description (If travel outs fellow stipend	ide of Texas, complete Schedule T)
	EXPENDITURE			Check if Austin, TX, officeho	
	Complete ONLY if direct expenditure to benefit C/OH			Office sought:	Office held:
F	Date	Payee name			
	08/29/2014	Yancy, Max			
Γ	Amount (\$)	Payee address City; State; 2	Zip Code		
	\$200.00	2409 East 9th St.11 Austin, TX 78702			
	PURPOSE OF	Category (See Categories listed at the top of the Salaries/Wages/Contract Labor	his schedule)	Description (If travel outs fellow stipend	ide of Texas, complete Schedule T)
-	EXPENDITURE			Check if Austin, TX, officeh	
	Complete ONLY in direct expenditure to benefit C/OH			Office sought:	Office held:
1					Electronic Cities Version 3 o

SCHEDULE F

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense

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

EXPENDITURE CATEGORIES

anse Salaries/Wages/Confract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhood/Septe Expense

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

Fees	Printing E	kpense		I/Rental Expense OTHER ow to complete this form.	(enter a category not listed above)
. DAGE#	Т	FILER NAME	JULE EXPIRITS HE	on to complete this form.	3 ACCOUNT # (TEC filers)
1 PAGE#	1-	Casar, Gregorio			00000010
Schedule: 19/19	5 Payee name				
4 Date 09/15/2014	Yancy, Max				
6 Amount (\$)	7 Payee address	City; State;	Zip Code		
\$200.00	2409 East 9th Austin, TX 78	St.11	•		
8 PURPOSE OF		Categories listed at the top ones/Contract Labor	of this schedule)	(b) Description (If travel fellow stipend	outside of Texas, complete Schedule T)
EXPENDITURE				Check if Austin, TX, offic	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Offi	ceholder name		Office sought:	Office held:
Date	Payee name	•-			
07/15/2014	Zavala, Patric		7:- 0-1-		
Amount (\$)	Payee address		Zip Code		
\$110.00	3110 Walnut Austin, TX 78				
PURPOSE OF		Categories listed at the top of es/Contract Labor	of this schedule)	Description (If travel Contract labor	outside of Texas, complete Schedule T)
EXPENDITURE				Check if Austin, TX, offi	ceholder living expense
Complete ONLY if direct expenditure to be nefit C/OH	Candidate / Off	îceholder name		Office sought:	Office held:
Date 08/01/2014	Payee name Zavala, Patrio	tia			
Amount (\$)	Payee address		Zip Code		
\$78.87	1	Ave			
PURPOSE OF		Categories listed at the top- es/Contract Labor	of this schedule)	Description (if travel contract labor	outside of Texas, complete Schedule T}
EXPENDITURE				Check if Austin, TX, off	iceholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Of	ficeholder name	estado de la composição d	Office saught:	Office held:
		antigoningh <sub>war</sub> -u-saadsi-u-u-usos-usosabobbbbbbbbbbbbbbbbbbbbbbbbbbbbbbbbb	ana ana ang mangalan di pada di paga da kang d	november of the second	
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Reportation of the Control of the Co					

SCHEDULE G

MADE FROM PERSONAL FUNDS								
Advertising Exper Accounting/Banki Consulting Exper Event Expense Fees	ing Legal Se ise Food/Be Polling B	ards/Memorial Expense ervices verage Expense Expense	Travel In District Travel Out Of District Office Overhead	/Contract Labor draising Expense t	Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholdet/Political Committee OTHER (enter a category not listed above) orm.			
1 PAGE#		2 FILER NAME			3 ACCOUNT # (TEC filers			
Schedule: 1/1 Re		Casar, Gregorio			00000010			
4 Date 09/11/2014	5 Payee name Austin Tejar	o Democrats						
6 Amount (\$) \$50.00	7 Payee addres 2544 Stoutw Austin, TX	rood Circle	Zip Code					
Reimbursement from political contributions intended					(If travel outside of Texas, complete Schedule T)			
8 PURPOSE OF EXPENDITURE	(a) Category (Se	e Categories listed at the lop s/Donations Made By officeholder/Political Co		(b) Description Political do				
				Check if Aust	tin, TX, officeholder living expense			
Date	Payee name							
08/19/2014	Dunn, Care							
Amount (\$)	Payee addre	ss City; State:	Zip Code					
\$45.28  Reimbursement from political contributions intended	Austin, ⊺X	78757			T. Cabadala T. I			
PURPOSE OF EXPENDITURE	Category (S	e Categories listed at the top ages/Contract Labor	of this schedule)	Description Contract la				
				Check if Aus	stin, TX, officeholder living expense			
					•			

# TEXT ANNOTATION Casar, Gregorio

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# Information entered by filer as a memo

Schedule

Information require for out of state PAC donation from Western Missouri and Kansas Laborers' District Council - PAC: Address: 8500 Ward Parkway Suite 300, Kansas City, MO 64114 - (816) 523-1919. District Council Executive Board appointed Treasurer Tim L. Bell, 8500 Ward Parkway Suite 300, Kansas City, MO 64114 (816) 523-1919. Information for other out of state PACS has been requested but not yet received.

### BUNDLING REPORT

Name of candidate/officeholder: Gregorio Casar

 For each person/bundler who has solicited and obtained campaign contributions on your behalf of \$200 or more per person from five (5) or more individuals during the reporting period, provide the following information. (This requirement does not apply to an individual who raises funds in total amount of \$5,000 or less for a candidate through a fundraising event held at the individual's residence.)

Name of Individual/Bundler	Address	Occupation	Employer	Total Amount Bundled
Martin Cirkiel	1201 County Road 138, Hutto, TX 78634	Attorney	Cirkiel & Associates	\$2,100.00
Solomon Kassa	2505 Alexander Ct, Round Rock, TX 78665	Driver	LoneStar Cab	\$5,000.00

2. For each person identified above, enter the name and address of each individual contributor whose contribution was bundled by that individual. Attach additional sheets if necessary.

Contribution was currently to the second sec								
Contact Name	Address	City	State	Zip	Occupation	Employer	Amount	Bundler
Martin Cirkiel	1201 County Road 138	Hutto	TX	78634- 5127	Attorney	Cirkiel & Associates	\$350.00	Martin Cirkiel
Pamela Cirkiel	1201 County Road 138	Hutto	TX	78634- 5127	Real Estate	M.E. Gene Johnson Realtors, Inc	\$350.00	Martin Cirkiel
A J Purgason	1403 Northridge Dr	Austin	TX	78723- 1824	Retired	Retired	\$350.00	Martin Cirkiel
Raymon Purgason	1403 Northridge Dr	Austin	TX	78723- 1824	Retired	Retired	\$350.00	Martin Cirkiel
Carolyn Tanksley	16925 Judy Scholl Way	Round Rock	TX	78681- 5406	Realtor	M.E. Gene Johnson Realtors, Inc	\$350.00	Martin Cirkiel
Ricky Tanksley	16925 Judy Scholl Way	Round Rock	TX	78681- 5406	Inspector	Oncor	\$350.00	Martin Cirkiel

Contact	Address	City	State	Zip	Occupation	Employer	Amount	Bundler
Name Tsegaye Chernet	PO Box 144542	Austin	TX	78714- 4542	Driver	Lonestar Cab	\$300.00	Solomon Kassa
Daniel Ejigu	1522 Thibodeaux Dr	Round Rock	TX	78664- 7209	Driver	AB Cab Co.	\$300.00	Solomon Kassa
Genet Melesse	1522 Thibodeaux Dr	Round Rock	TX	78664- 7209	Internet Small business owner	Self	\$300.00	Solomon Kassa
Teferi Engdaw	2505 Alexander Ct	Round Rock	TX	78665- 7917	Driver	Lonestar Cab	\$300.00	Solomon Kassa
Firew Getahun	2722 High Point Dr	Round Rock	TX	78664- 5790	Accountant	Financial freedom	\$300.00	Solomon Kassa
Hirut Hailu	2722 High Point Dr	Round Rock	TX	78664- 5790	Financial Freedom	Production	\$300.00	Solomon Kassa
Yodit Tekle	2958 Donnell Dr	Round Rock	TX	78664- 5709	Owner	Yasay, Inc	\$300.00	Solomon Kassa
Solomon Kassa	2958 Donnell Dr	Round Rock	TX	78664- 5709	Operator	Capital Metro	\$300.00	Solomon Kassa
Denberwa Kebede	17205 Tobermory Dr	Pflugerville	TX	78660- 1726	Attendant	DPS	\$300.00	Solomon Kassa
Abera Mersha	9001 Briardale Dr	Austin	TX	78758- 6429	Driver	Lonestar Cab	\$200.00	Solomon Kassa
Workey Mersha	9001 Briardale Dr	Austin	TX	78758- 6429	Homemaker	None	\$200.00	Solomon Kassa
Zenaw Mersha	9001 Briardale Dr	Austin	TX	78758- 6429	Driver	Lonestar Cab	\$300.00	Solomor Kassa
Yemane Seifu	1015 E Yager Ln, Unit 92	Austin	TX	78753- 7007	Retired	Retired	\$300.00	Solomor Kassa
Ababa Siyum	13608 Merseyside Dr	Pflugerville	TX	78660- 8870	Homemaker	Homemaker	\$200.00	Solomor Kassa
Eyeyu Yosief	13608 Merseyside Dr	Pflugerville	TX	78660- 8870	Driver	Lonestar Cab	\$200.00	Solomor Kassa
Tigabu Yedeme	941 Hesters Crossing Rd, Apt. 2702	Round Rock	TX	78681- 7832	Driver	Lonestar Cab	\$300.00	Solomo Kassa
Meserete Woldegebriel	942 Hesters Crossing	Round Rock	TX	78681- 7832	House keeper	Seton Hospital	\$300.00	Solomo Kassa
Mulugeta Zeleke	17205 Tobermory Dr	Pflugervill	e TX	78660- 1726	. Driver	Lonestar Cab	\$300.00	Solomo Kassa

SCHEDULE ATX.	5 - attach to form C/OH (C & E)
Reference § 2-2-22,	Austin City Code

3.	Identify each person registered or required to be register under City Code, Chapter 4-8 (Regulation of Lobbyists) employed by, or compensated to lobby by: (1) any Bundler identified in Section 1 above, (2) a business association through which the Bundler does business, or (3) the Bundler's employer.

Note: It is important to remember that contributions to you are from the actual donor, not from the individual who solicited the donations on your behalf. Therefore, on form C/OH you must identify the actual donor as the contributor.

### STATE OF TEXAS VERIFICATION

I certify that the total amount bundled on my behalf in the campaign period by all partners, shareholders, principals, employees, and persons who conduct business through a business association that is subject to City Code, Section 2-2-22(E), when added together, does not exceed ten (10) times the contribution limit set by City Charter, Article III, Section 8(A)(1) for the entire business association.

Signature