

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers) 20140704		2 PAGE # 1 of 8	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Ms.		FIRST Majorie	MI	OFFICE USE ONLY Date Received Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged
	NICKNAME Margie		LAST Burciaga	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX;		APT / SUITE #;	CITY;	STATE; ZIP CODE
	P.O. Box 28366 Austin, TX 78755				
5 CAMPAIGN TREASURER NAME	MS / MRS / MR		FIRST Mindy	MI	Date Received Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged
	NICKNAME		LAST Montford	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY;	STATE; ZIP CODE
100 Guadalupe Austin, TX 78701					
7 CAMPAIGN TREASURER PHONE	AREA CODE		PHONE NUMBER	EXTENSION	
(512) 651-6375					
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)				
9 PERIOD COVERED	Month Day Year    Month Day Year 09/26/2014    THROUGH    10/25/2014				
10 ELECTION	ELECTION DATE Month Day Year 11/04/2014		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) Austin City Council District 10		
GO TO PAGE 2					

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

13 C/OH NAME Burciaga, Majorie (Ms.)

14 ACCOUNT # (Ethics Commission filers)  
2014070415 NOTICE  
FROM  
POLITICAL  
COMMITTEE(S)

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

COMMITTEE TYPE

COMMITTEE NAME

☐ GENERAL

COMMITTEE ADDRESS

☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages16 CONTRIBUTION  
TOTALS1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN  
PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$

0.00

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

\$

1,350.00

EXPENDITURE  
TOTALS

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

\$

0.00

4. TOTAL POLITICAL EXPENDITURES

\$

3,522.89

CONTRIBUTION  
BALANCE5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE  
LAST DAY OF THE REPORTING PERIOD

\$

3,250.59

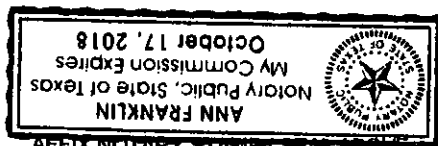
OUTSTANDING  
LOAN TOTALS6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE  
LAST DAY OF THE REPORTING PERIOD

\$

5,000.00

## 17 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



Majorie Burciaga  
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Majorie Burciaga, this the 27<sup>th</sup> day of October, 2014, to certify which, witness my hand and seal of office.

Ann Franklin  
Signature of officer administering oath

Ann Franklin  
Print name of officer administering oath

Notary  
Title of officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/2 Report: 3/8	
2 FILER NAME Burciaga, Majorie (Ms.)		3 ACCOUNT # (Ethics Commission filers) 20140704	
4 Date  10/09/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Barksdale, Jacqueline (Mrs.)  6 Contributor address; City; State; Zip Code 2309 Quarry Rd Austin, TX 78703	7 Amount of contribution (\$)  \$200.00	8 In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Community Volunteer		10 Employer (See Instructions)	
Date  10/07/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cartwright, Darlyn (Mrs.)  Contributor address; City; State; Zip Code 7805 Comfort Cove Austin, TX 78731	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions)	
Date  10/07/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cartwright, Drew (Mr.)  Contributor address; City; State; Zip Code 7805 Comfort Cove Austin, TX 78731	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) AS COM, LLC	
Date  10/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Geibel, Roger and Eunice  Contributor address; City; State; Zip Code 7904 Moritz Lane Austin, TX 78731	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)	
Date  09/29/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McPhail, Larry and Judy  Contributor address; City; State; Zip Code 1314 Falcon Ledge #116 Austin, TX 78746	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 2/2 Report: 4/8

2 FILER NAME Burciaga, Majorie (Ms.)

3 ACCOUNT # (Ethics Commission filers)

20140704

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Oles, Pat (Mr.)

7 Amount of  
contribution (\$)

8 In-kind contribution  
description (if applicable)

09/26/2014

6 Contributor address; City; State; Zip Code  
2109 Rockmoor  
Austin, TX 78703

\$350.00

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
President

10 Employer (See Instructions)  
Barshop & Oles

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Thomas, Fred (Mr.)

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

10/05/2014

Contributor address; City; State; Zip Code  
P O Box 29119  
Austin, TX 78755

\$350.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
American Bank of Commerce

Employer (See Instructions)  
Senior VP

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Trull, Chris

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

10/13/2014

Contributor address; City; State; Zip Code  
3704 Eastledge Dr  
Austin, TX 78731

\$150.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
NONE

Employer (See Instructions)

**PLEDGED CONTRIBUTIONS****SCHEDULE B**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/1 Report: 5/8	
2 FILER NAME Burciaga, Majorie (Ms.)		3 ACCOUNT # (Ethics Commission filers) 20140704	
4 TOTAL OF UNITEMIZED PLEDGES:      ⇄   ⇄   ⇄   ⇄   ⇄   ⇄		\$	
5 Date  10/25/2014	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Williams, Louis and Nila ..... 7 Pledgor address;      City; State; Zip Code 201 Lavaca #536 Austin, TX 78701	8 Amount of pledge (\$)  \$100.00  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	9 In-kind description (if applicable)
10 Principal occupation / Job title (See Instructions) Realtor		11 Employer (See Instructions) Sotheby's	

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 1/2 Report: 6/8		<b>2 FILER NAME</b> Burciaga, Majorie (Ms.)		<b>3 ACCOUNT # (TEC filers)</b> 20140704	
<b>4 Date</b> 10/09/2014	<b>5 Payee name</b> Community Impact Newspaper				
<b>6 Amount (\$)</b> \$2,175.00	<b>7 Payee address</b> City; State; Zip Code 16225 Impact Way. #1 Pflugerville, TX 78660				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Advertising Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> print ad		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name Office sought: Office held:				
<b>Date</b> 10/05/2014	<b>Payee name</b> Lowe's				
<b>Amount (\$)</b> \$15.10	<b>Payee address</b> City; State; Zip Code 8000 Shoal Creek Blvd Austin, TX 78757				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) OTHER - equipment		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> sign posts		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name Office sought: Office held:				
<b>Date</b> 10/25/2014	<b>Payee name</b> Texas Welding Supply Co				
<b>Amount (\$)</b> \$247.74	<b>Payee address</b> City; State; Zip Code 4705 Commercial Park Dr Austin, TX 78724				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> helium for balloons (\$125 dep for tank included to be reimbursed)		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name Office sought: Office held:				
<b>Date</b> 10/09/2014	<b>Payee name</b> West Austin News				
<b>Amount (\$)</b> \$380.25	<b>Payee address</b> City; State; Zip Code 5511 Parkcrest Drive #105 Austin, TX 78731				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> print ad		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name Office sought: Office held:				

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 2/2 Report: 7/8		<b>2 FILER NAME</b> Burciaga, Majorie (Ms.)		<b>3 ACCOUNT # (TEC filers)</b> 20140704
<b>4 Date</b> 10/23/2014	<b>5 Payee name</b> West Austin News			
<b>6 Amount (\$)</b> \$475.00	<b>7 Payee address</b> City; State; Zip Code 5511 Parkcrest Drive Suite 105 Austin, TX 78731			
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Advertising Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> print ad	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	<b>Candidate / Officeholder name</b> <b>Office sought:</b> <b>Office held:</b>			

# **POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS**

## **SCHEDULE G**

### **EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 1/1 Report: 8/8	<b>2 FILER NAME</b> Burciaga, Majorie (Ms.)	<b>3 ACCOUNT # (TEC filers)</b> 20140704
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<b>4 Date</b> 09/30/2014	<b>5 Payee name</b> Facebook, :
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<b>6 Amount (\$)</b> \$9.98 <input type="checkbox"/> Reimbursement from political contributions intended	<b>7 Payee address</b> City: State: Zip Code 1601 Willow Road Menlo Park, CA 94025
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<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Advertising Expense	<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Advertising on FB  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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<b>Date</b> 10/03/2014	<b>Payee name</b> Lowe's
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<b>Amount (\$)</b> \$56.33 <input type="checkbox"/> Reimbursement from political contributions intended	<b>Payee address</b> City: State: Zip Code 8000 Shoal Creek Blvd Austin, TX 78757
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) OTHER - Equipment	<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> sign post equipment  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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<b>Date</b> 10/04/2014	<b>Payee name</b> Lowe's
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<b>Amount (\$)</b> \$163.49 <input type="checkbox"/> Reimbursement from political contributions intended	<b>Payee address</b> City: State: Zip Code 8000 Shoal Creek Blvd Austin, TX 78757
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) OTHER - Equipment	<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> sign post equipment  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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