FORM C/OH CANDIDATE / OFFICEHOLDER COVER SHEET PG 1 CAMPAIGN FINANCE REPORT 1 ACCOUNT # 2 PAGE# The C/OH INSTRUCTION GUIDE explains how to complete this form. (Ethics Commission filers) 1 of 30 00000001 CANDIDATE / MS / MRS / MR FIRST OFFICE USE ONLY OFFICEHOLDER Mrs Ellen NAME Date Received NICKNAME LAST SUFFIX Troxclair ADDRESS / PO BOX; APT / SUITE #; СПҮ; STATE; ZIP CODE CANDIDATE / **OFFICEHOLDER** MAILING 8510 Tyhurst Dr. **ADDRESS** Date Hand-delivered or Date Postmarked Austin, TX 78749 Change of Address Receipt # Amount CAMPAIGN MS / MRS / MR FIRST Date Processed TREASURER Leslie NAME Date Imaged LAST NICKNAME SUFFIX RE Robnett GBAIB CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #: ZIP CODE CITY: STATE: TREASURER **ADDRESS** 2411 Sharon Lane (Residence or business) Austin, TX 78703 CAMPAIGN AREA CODE PHONE NUMBER EXTENSION **TREASURER** (512) 294-3583 PHONE 8 REPORTTYPE January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only) 8th day before election Exceeded \$500 limit Final report (Attach C/OH - FR) PERIOD Month Year Day Month Day Year COVERED THROUGH 09/26/2014 10/25/2014 10 ELECTION **ELECTION DATE** ELECTION TYPE Month Day X General Primary Runoff Special 11/04/2014 11 OFFICE OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) Austin City Council District 8 **GO TO PAGE 2**

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512)463-5800 TDD 1-800-735-2989 CANDIDATE / OFFICEHOLDER REPORT: FORM C/OH SUPPORT & TOTALS COVER SHEET PG 2 13 C/OH NAME Troxclair, Ellen (Mrs.) 14 ACCOUNT # (Ethics Commission filers) 00000001 .. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may 15 NOTICE have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this FROM information only if they receive notice of such expenditures. .. **POLITICAL** COMMITTEE NAME COMMITTEE TYPE COMMITTEE(S) GENERAL COMMITTEE ADDRESS SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME additional pages COMMITTEE CAMPAIGN TREASURER ADDRESS 16 CONTRIBUTION TOTALS TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN 1. 0.00. \$ PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED TOTAL POLITICAL CONTRIBUTIONS 2 \$ (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) 8.008.00 EXPENDITURE 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED **TOTALS** \$ 0.00 **TOTAL POLITICAL EXPENDITURES** \$ 23,039.05 CONTRIBUTION 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE BALANCE \$ 69,613.00 LAST DAY OF THE REPORTING PERIOD OUTSTANDING TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LOAN TOTALS \$ LAST DAY OF THE REPORTING PERIOD 55,000.00 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. THOMAS A. GRAUZER votary Public, State of Texas My Commission Expires November 19, 2018 Signature of Candidate of Officensia

AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said to certify which, witness my hand and seal of office Signature of officer administering Print name of officer administering oath

POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS PAGE# The INSTRUCTION GUIDE explains how to complete this form. Schedule: 1/11 Report: 3/30 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Troxclair, Ellen (Mrs.) 00000001 5 Full name of contributor out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Abbott, Sean & Alexandra 09/29/2014 6 Contributor address: City: State: Zip Code \$200.00 4614 S 2nd Street Austin, TX 78745 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Attorney Allen Boone Humphries Robinson LLP Date Full name of contributor ut-of-state PAC (ID# Amount of In-kind contribution contribution (\$) description (il applicable) Allen, Tom & Kathleen 10/17/2014 Contributor address; City; State; Zip Code \$100.00 2400 McCue #362 Houston, TX 77056 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) **Energy Utility** Director Full name of contributor ut-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (il applicable) Bartley, John T Jr. Contributor address: 10/15/2014 City; State; Zip Code \$25.00 12035 Royal Lytham Court Charlotte, NC 28277 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Sisters of Mercy Full name of contributor ut-of-state PAC (ID# In-kind contribution Date Amount of contribution (\$) description (if applicable) Bennett, Craig 10/02/2014 Contributor address; City; State; Zip Code \$50.00 7503 Corrie Cove Austin, TX 78749 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Administrative Judge State Office of Administrative Hearings Full name of contributor ut-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Bennett, John 10/24/2014 Contributor address: City; State; Zip Code \$25.00 507 E. Forrest St. Victoria, TX 77901 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Walker Keeling LLP Attorney

UTHER	THAN PLEDGES OR LOAD			
The Instruction	ON GLIDE explains how to complete this form.		1 PAGE # Schedule: 2/*	11 Report: 4/30
2 FILER NAME	Troxclair, Ellen (Mrs.)		3 ACCOUNT # 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID# Bowen, Scott)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
09/27/2014	6 Contributor address; City; State; Zip Code 4323 Towering Oak Court Houston, TX 77059		\$50.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occup Chemical En	pation / Job title (See Instructions) gineer	10 Employer (See In None	structions)	
Date	Full name of contributor utl-of-state PAC (ID# Cantella, Richard (Mr.))	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/25/2014	Contributor address; City; State; Zip Code 7501 Shadowridge Run, Unit 163 Austin, TX 78749		\$50.00	{
			(If travel outside of	Texas, complete Schedule T)
Principal occup Financial Adv	Dation / Job tille (See Instructions) visor	Employer (See In Retired		Total, complete contains ()
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/24/2014	Contributor address; City; State; Zip Code 8205 Forest Heights Ln Austin, TX 78749		\$25.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Medical Billin	pation / Job title (See Instructions) Ig	Employer (See In Self	structions)	
Date	Full name of contributor	<u>+</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/24/2014	Contributor address; City; State; Zip Code 12325 Aralia Ridge Drive Austin, TX 78739		\$50.00	{
			(If travel outside of	Texas, complete Schedule T)
Principal occup Clerk	pation / Job title (See Instructions)	Employer (See In State of Texas	`	Texas, cumplete schodule 1)
Date	Full name of contributor ut-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/26/2014	Contributor address; City; State; Zip Code 9519 Anchusa Trail Austin, TX 78736	• • • • • • • • • • • • • • • • • • • •	\$200.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occu Healthcare	pation / Job title (See Instructions)	Employer (See In MedAssets	<u> </u>	· · · · · · · · · · · · · · · · · · ·

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

The Instruction	on Guide explains how to complete this form.		1 PAGE#	1 Report: 5/30
2 FILER NAME	Troxclair, Ellen (Mrs.)		3 ACCOUNT # 00000001	(Ethics Commission filers)
1 Date	5 Full name of contributor out-of-state PAC (ID# Fowler, Nancy (Ms.)	/)	7 Amount of contribution (\$)	B In-kind contribution description (if applicable)
10/25/2014	6 Contributor address: City; State; Zip Code 6429 Old Harbor Lane Austin, TX 78739		\$20 .00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Retired	pation / Job title (See Instructions)	10 Employer (See In Retired	structions)	
Date	Full name of contributor ut-of-state PAC (ID# Garza, Simon & Liz)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/25/2014	Contributor address; City; State; Zip Code 5913 Savin Hill Ct. Austin, TX 78739		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Instructor	pation / Job title (See Instructions)	Employer (See In ACC	structions)	
Date	Full name of contributor out-of-state PAC (ID# Gibbs, John		Amount of contribution (\$)	In-kind comribution description (if applicable)
10/01/2014	Contributor address; City; State; Zip Code 5901 B Paseo Del Toro Austin, TX 78731		\$50.00	[]
			<u> </u>	Texas, complete Schedule T)
Principal occup Legislative St	oation / Job title (See Instructions) taff	Employer (See In Texas Leigslatu	•	
Date	Full name of contributor ☐ out-of-state PAC (ID# Gramlich Jr., Martin	*	Amount of contribution (\$)	In-kind contribution description (il applicable)
10/19/2014	Contributor address; City; State; Zip Code 10701 Redmond Rd. Austin, TX 78739	, , ,	\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Consultant	oation / Job title (See Instructions)	Employer (See In TX Technology	structions) Consulting Group	, LLC
Date	Full name of contributor out-of-state PAC (ID# Hartman, Dougfas & Julie	")	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/17/2014	Contributor address; City; State; Zip Code 6501 Soter Pkwy Austin, TX 78735		\$700.00	!]
			(If travel outside of	Texas, complete Schedule T)
Principal occur	pation / Job title (See Instructions)	Employer (See In	structions)	

\$100.00

Employer (See Instructions)

Retired

(If travel outside of Texas, complete Schedule T)

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: 4/11 Report: 6/30 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Troxclair, Ellen (Mrs.) 00000001 Date 5 Full name of contributor out-of-state PAC (ID#) Amount of In-kind contribution contribution (S) description (if applicable) Hebert, Dede 6 Contributor address; 10/24/2014 City; State; Zip Code \$25.00 4821 Chesney Ridge Austin, TX 78749 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Homemaker Self Full name of contributor ut-of-state PAC (ID# In-kind contribution Date Amount of description (if applicable) contribution (\$) Heckler, Jeff Contributor address; 10/14/2014 City; State; Zip Code \$150.00 11006 Sierra Verde Trail Austin, TX 78759 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Lobbyist GovBiz Partners Full name of contributor ut-ol-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Herrington, Rebecca 10/13/2014 Contributor address: City: State: Zip Code \$150.00 5000 Mission Oaks Blvd #13 Austin, TX 78735 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Volunteer Self In-kind contribution description (il applicable) Date Amount of contribution (\$) Hersey, Paul E

City: State; Zip Code

Contributor address;

PO Box 160784 Austin, TX 78716

Principal occupation / Job title (See Instructions)

10/16/2014

Retired

POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS PAGE# The Instruction Guide explains how to complete this form. Schedule: 5/11 Report: 7/30 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Troxclair, Ellen (Mrs.) 00000001 ut-of-state PAC (ID# Date 5 Full name of contributor Amount of In-kind contribution Hock, Stacy & Joel contribution (\$) description (if applicable) 6 Contributor address; 10/10/2014 City; State; Zip Code \$700.00 3331 Westlake Drive Auslin, TX 78746 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) **Philanthropist** Self Date Full name of contributor out-of-state PAC (ID# in-kind contribution Amount of description (if applicable) contribution (\$) Hurst, Michaelanne 10/21/2014 Contributor address; City; State; Zip Code \$50.00 8302 Moccasin Path Austin, TX 78736 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Director of Advancement City School Full name of contributor ut-of-state PAC (ID# Date Amount of In-kind contribution contribution (S) description (if applicable) Jamail, Tim Contributor address: 10/24/2014 City; State; Zip Code \$250.00 8509 Southwest Parkway Austin, TX 78735 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Real Estate Broker/Developer Self In-kind contribution description (if applicable) Date Full name of contributor ut-of-state PAC (ID# Amount of contribution (\$) Jimenez, David 09/26/2014 Contributor address; City; State; Zip Code \$50.00 6800 W Gate Blvd #101 Austin, TX 78745 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Date Full name of contributor ut-of-state PAC (ID# Amount of In-kind contribution contribution (\$) description (if applicable) Jones, James Event expense 10/10/2014 Contributor address; City; State; Zip Code \$155.00 3700 Thompson St. Austin, TX 78702 (if travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Entrepreneur Self employed

OTHER	THAN PLEDGES OR LOAI	49		
The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 6/	11 Report: 8/30
2 FILER NAME	Troxclair, Ellen (Mrs.)		3 ACCOUNT # 00000001	(Ethics Commission lilers)
4 Date	5 Full name of contributor	<u> </u>	7 Amount of contribution (\$)	In-kind contribution description (il applicable)
10/24/2014	6 Contributor address; City; State; Zip Code 4001 Tecate Trl. Austin, TX 78739		\$25.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occup Insurance Sa	oation / Job title (See Instructions) eles	10 Employer (See In Self	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (il applicable)
09/30/2014	Contributor address; City; State; Zip Code 3624 Aspen Creek Pkwy Austin, TX 78749		\$50.00	
		<u></u>	1	• Texas, complete Schedule T)
Principal occup Engineer	pation / Job title (See Instructions)	Employer (See In AMD	structions)	
Date	Full name of contributor 🔲 out-of-state PAC (ID# Klenzendorf, Brandon	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/14/2014	Contributor address; City; State; Zip Code 2907 Glenview Ave Austin, TX 78703		\$25.00	
				Texas, complete Schedule T)
Principal occup Civil Enginee	oation / Job title (See Instructions) r	Employer (See In Geosyntec	structions)	
Date	Full name of contributor	/)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/25/2014	Contributor address; City; State; Zip Code 5912 Savin Hill Ct. Austin, TX 78739		\$100.00	
			(ii travel outside of	Texas, complete Schedule T)
Principal occup Retired	ation / Job title (See Instructions)	Employer (See In Retired	structions)	
Date	Full name of contributor	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/10/2014	Contributor address; City; State; Zip Code 121 Monarch Lane Austin, TX 78737	•••••	\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup CEO/Owner	oation / Job title (See Instructions)	Employer (See In Arise Healthcar		

L	OTHER	THAN PLEDGES OR LOAD	45		
	The Instruction	on Guide explains how to complete this form.		1 PAGE# Schedule: 7/	11 Report: 9/30
2	FILER NAME	Troxclair, Ellen (Mrs.)		3 ACCOUNT# 00000001	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Lupton, Angus)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	10/06/2014	6 Contributor address; City; State; Zip Code 8700 Fritsch Drive Austin, TX 78717		\$100.00	
L				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Legislative Di	ation / Job title (See Instructions) rector	10 Employer (See In Texas Senate	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/02/2014	Contributor address; City; State; Zip Code 11727 Sterling Panorama Austin, TX 78738	•••••	\$350.00	f
					Texas, complete Schedule T)
	Principal occup Finance	ation / Job title (See Instructions)	Employer (See In Clean Scapes,		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (il applicable)
	10/17/2014	Contributor address; City; State; Zip Code 1708 Palma Ptz Austin, TX 78703		\$133.00	[
L					Texas, complete Schedule T)
	Principal occup Gov Affairs	oation / Job title (See Instructions)	Employer (See in Self	structions)	
	Date	Full name of contributor out-of-state PAC (ID# McKay, Tom & Kathleen)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10 <i>/</i> 07 <i>/</i> 2014	Contributor address; City; State; Zip Code 11339 Taylor Draper Lane Austin, TX 78759		\$700.00	1 ! !
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Inventor	oation / Job title (See Instructions)	Employer (See In Self	structions)	
	Dale	Full name of contributor out-of-state PAC (ID# McNutt, Thomas)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/27/2014	Contributor address; City; State; Zip Code 1555 Princeton Drive Corsicana, TX 75110		\$50.00	1 1 1
L				(If travel outside of	Texas, complete Schedule T)
	Principal occur Manager	oation / Job title (See Instructions)	Employer (See In Collin Street Ba		· · · · · · · · · · · · · · · · · · ·
l			Julia Olivot De		

L	OTHER	THAN PLEDGES OR LOAD	NS 		
	The Instruction	NGUIDE explains how to complete this form.		1 PAGE# Schedule: 8/	11 Report: 10/30
2	FILER NAME	Troxclair, Ellen (Mrs.)		3 ACCOUNT # 00000001	(Ethics Commission filers)
4	Date	5 Full name of contributor out-of-state PAC (IDA Miller, Gene	!	7 Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/20/2014	6 Contributor address; City; State; Zip Code 6205 Tanak Cove Austin, TX 78749		\$25.00	
L				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Retired	pation / Job title (See Instructions)	10 Employer (See In Retired	structions)	
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/08/2014	Contributor address; City; State; Zip Code 7849 Escala Drive Austin, TX 78735		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Investments	pation / Job title (See Instructions)	Employer (See In Self		
	Date	Full name of contributor out-of-state PAC (ID# Moore, Gates)	Amount of contribution (\$)	In-kind contribution description (# applicable)
	10/10/2014	Contributor address; City; State; Zip Code 7706 Vail Valley Dr Austin, TX 78749		\$25.00	
L				(If travel outside of	Texas, complete Schedule T)
	Principal occup Bus Driver	pation / Job title (See Instructions)	Employer (See In Willie Nelson	structions)	
	Date	Full name of contributor	/)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/21/2014	Contributor address; City; State; Zip Code 7706 Vail Valley Dr Austin, TX 78749		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Bus Driver	ation / Job title (See Instructions)	Employer (See In Willie Nelson	structions)	
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/02/2014	Contributor address; City; State; Zip Code 6632 Ruxton Lane Austin, TX 78749		\$150.00	1
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Manager	pation / Job title (See Instructions)	Employer (See In Drake Industrie		
•	=		•		

POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS PAGE# The INSTRUCTION GUIDE explains how to complete this form. Schedule: 9/11 Report: 11/30 ACCOUNT # (Ethics Commission filers) Troxclair, Ellen (Mrs.) 2 FILER NAME 00000001 Date 5 Full name of contributor ut-of-state PAC (ID# Amount of in-kind contribution contribution (\$) description (if applicable) Naughton, Philip 6 Contributor address; 10/08/2014 City; State; Zip Code \$350.00 9312 Lightwood loop Austin, TX 78748 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Engineer Applied Materials Date Amount of In-kind contribution contribution (\$) description (if applicable) Persinger, Michael Contributor address; 10/22/2014 City; State; Zip Code \$150.00 1804 Intervail Austin, TX 78746 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Son & Kitao LLC Self Date Full name of contributor ut-of-state PAC (ID# Amount of In-kind contribution contribution (\$) description (if applicable) Pomeroy, Cory 10/24/2014 Contributor address; City; State: Zip Code \$100.00 1415 Westover Road Austin, TX 78703 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Attorney TXOGA Date Amount of In-kind contribution contribution (\$) description (if applicable) Riland, Patty & Tom 10/14/2014 Contributor address; City; State; Zip Code \$100.00 6706 Convict Hill Road Auslin, TX 78749 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) General Lines Agent Stateside Insurance Services Date Full name of contributor ut-of-state PAC (ID# Amount of In-kind contribution contribution (\$) description (if applicable) Rodriguez, Luis 10/10/2014 Contributor address; City; State; Zip Code \$100.00 10058 Circleview Dr. Auslin, TX 78735 (if travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Business owner Self

P.O.Box 12070

POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS PAGE # The Instruction Guide explains how to complete this form. Schedule: 10/11 Report: 12/30 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Troxclair, Ellen (Mrs.) 00000001 Full name of contributor ☐ out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Rudd, Tyler 6 Contributor address: City; State; Zip Code 09/30/2014 \$100.00 5908 Down Valley Court Austin, TX 78731 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Legislative Consultant Self Full name of contributor ut-of-state PAC (ID# Date In-kind contribution Amount of description (if applicable) contribution (\$) Sajovich, David 10/07/2014 Contributor address: City; State: Zip Code \$100.00 1904 Woodland Ave Apt B Austin, TX 78741 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Real Estate Self Full name of contributor ut-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Shaw, Stuart Contributor address: 10/14/2014 City; State; Zip Code \$350.00 6009 Eleos Circle Austin, TX 78735 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Developer Self Full name of contributor ut-of-state PAC (1D# Date Amount of In-kind contribution contribution (\$) description (if applicable) Sindelar, Gregory 09/30/2014 Contributor address; City; State; Zip Code \$50.00 9000 Sommertand Way Austin, TX 78749 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) COO Date Full name of contributor ut-of-state PAC (ID# Amount of In-kind contribution contribution (\$) description (if applicable) Taylor, Kathy 09/28/2014 Contributor address; City; State; Zip Code \$225.00 200 Congress Avenue #27EG Austin, TX 78701 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Community Volunteer Self

POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS PAGE# The Instruction Guide explains how to complete this form. Schedule: 11/11 Report: 13/30 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Troxclair, Ellen (Mrs.) 00000001 ut-of-state PAC (ID# Date 5 Full name of contributor Amount of In-kind contribution contribution (\$) description (if applicable) Taylor, Randy 6 Contributor address; City; State; Zip Code 09/28/2014 \$225.00 200 Congress Avenue #27EG Austin, TX 78701 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) President/CEO Pinnergy Date Full name of contributor ut-of-state PAC (ID# Amount of In-kind contribution contribution (\$) description (if applicable) Twining, Trenton G. Contributor address; 10/10/2014 City, State Zip Code \$25.00 5302 Summerset Trail Austin, TX 78749 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Computer Programmer QUIC Inc. Full name of contributor ut-of-state PAC (iD# Date Amount of In-kind contribution contribution (\$) description (il applicable) Vaughan, Susanne Contributor address; 09/28/2014 City; State; Zip Code \$75.00 1211 Dusky Thrush Trail Austin, TX 78746 (fi travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Date Amount of In-kind contribution contribution (\$) description (if applicable) Womack, Daniel 10/03/2014 Contributor address; City; State; Zip Code \$100.00 6904 Barstow Court Austin, TX 78749 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Gov Affairs Dow Chemical

POLITIC	AL EXPENDITURES		SCHEDULE F
		RE CATEGORIES	·
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ing Legal Services Solic nse Food/Beverage Expense Trav Polling Expense Trav Printing Expense Office	itation/Fundraising Expense Tra el In District Co el Out Of District	an Repayment/Reimbursement insportation Equipment & Related Expense htributions/Donations Made By Candidate/Officeholder/Political Committee HER (enter a category not listed above)
1 PAGE# Schedule: 1/17 F	2 FILER NAME Troxclair, Ellen (Mrs.)		3 ACCOUNT # (TEC filers) 00000001
4 Date	5 Payee name Conviction Digital		
10/07/2014 6 Amount (\$)	7 Payee address City; State; Zip C	ode.	
\$609.97	l		
8 PURPOSE	(a) Category (See Categories listed at the top of this sol Advertising Expense	hedule) (b) Description (if to digital media	avel outside of Texas, complete Schedule T)
OF EXPENDITURE		Chack if Auctin TV	officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
10/08/2014	Conviction Digital		
Amount (\$) \$210.21	Payee address City: State; Zip C 401 Little Texas Lane #1731 Austin, TX 78745	ode	
PURPOSE OF EXPENDITURE	Calegory (See Calegories listed at the top of this so Advertising Expense	nedule) Description (II tra digital media	avel outside of Texas, complete Schedule T)
EXI CIDITOTIC		Check if Austin, TX,	officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 09/26/2014	Payee name CVS		
Amount (\$) \$5.39	Payee address City; State; Zip C 2101 S. Lamar Blvd. Austin, TX 78704	ode	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this so Event Expense	event supplies	avel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 10/25/2014	Payee name Jersey Mike's		
Amount (\$) \$33.15	Payee address City; State; Zip C 4404 William Cannon Austin, TX 78740	ode	
PURPOSE OF EXPENDITURE	Calegory (See Calegories listed at the top of this set Food/Beverage Expense	Description (II to Food for volunte	avel outside of Texas, complete Schedule T) ers
Complete Call V.	Candidate / Office holder na		Officeholder living expense
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought:	Office held:

POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Advertising Expense Accounting/Banking Consulting Expense Event Expense Gitts/Awards/Memorial Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Legal Services Travel In District Travel Out Of District Office Overhead/Rental Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Food/Beverage Expense Printing Expense The Instruction Guide explains how to complete this form. 1 PAGE# 2 FILER NAME 3 ACCOUNT # (TEC filers) Troxclair, Ellen (Mrs.) Schedule: 2/17 Report: 15/30 00000001 4 Date 5 Payee name LVS 10/06/2014 City; State; Zip Code 6 Amount (\$) Payee address 3700 Thompson St. \$450.00 Austin, TX 78702 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) PURPOSE data services Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought: 9 Complete ONLY if Office held: direct expenditure to benefit C/OH Date Pavee name LVS 10/06/2014 Amount (\$) Payee address City; State; Zip Code \$450.00 3700 Thompson St. Austin, TX 78702 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE data services Advertising Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY i Candidate / Officeholder name Office sought: Office held: direct expanditure to benefit C/OH Date Payee name Mailchimp 10/11/2014 Amount (\$) Payee address City; State; Zip Code 512 Means St NW #404 \$75.00 Atlanta, GA 30318 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** email marketing 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 CAOH Payee name McGee, Chelsey 09/30/2014 Amount (\$) Payee address City: State: Zip Code 3816 S Lamar Blvd Austin, TX 78704 \$1,500.00 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description Staff pay **PURPOSE** Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH

POLITIC	AL EXPENDITURES	SCHEDULE F
	EXPENDITURE	CATEGORIES
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	nse Gifts/Awards/Memorial Expense Salaries ng Legal Services Solicida ise Food/Beverage Expense Travel (Polling Expense Office C	s/Wages/Contract Labor Loan Repayment/Reimbursement Transportetion Equipment & Related Expense on District Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) ains how to complete this form.
1 PAGE# Schedule: 3/17 F	2 FILER NAME Troxclair, Ellen (Mrs.)	3 ACCOUNT # (TEC titers) 00000001
4 Date 09/30/2014	5 Payee name Paragon Printing	
6 Amount (\$) \$1,491.72	7 Payee address City; State; Zip Code 10423 McKalla Place Austin, TX 78758	e
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sched Printing Expense	(b) Description (If travel outside of Texas, complete Schedule T) printing campaign materials
EXI ENDITORE		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
10/06/2014	Paragon Printing	
Amount (\$)	Payee address City; State; Zip Cod	e ,
\$1,491.72	10423 McKalla Place Austin, TX 78758	
DUDDOCE	Calegory (See Categories listed at the top of this sched	
PURPOSE OF EXPENDITURE	Printing Expense	printing campaign materials
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
Date	Payee name	
10/16/2014	Paragon Printing	
Amount (\$)	Payee address City; State; Zip Code	e
\$1,206.90	10423 McKalla Place Austin, TX 78758	
DUDDOOF	Category (See Categories listed at the top of this sched	dule) Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Printing Expense	printing campaign materials
EXPENDITURE		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
10/17/2014	Paragon Printing	
Amount (\$)	Payee address City; State; Zip Cod	e
\$1,845.65	10423 McKalla Place Austin, TX 78758	
0.1.05	Category (See Categories listed at the top of this sched	
PURPOSE OF	Printing Expense	printing campaign materials
EXPENDITURE		n
Complete ONLY if	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
direct expenditure	Sandrate / Sinctifying Haine	Office sought. Office field.

POLITIC	CAL EXPENDITURES		SCHEDULE F
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ing Legal Services Solicitation/Fi nse Food/Beverage Expense Travel In Distr Polling Expense Travel Out Of	as/Contract Labor Loan Repaym indraising Expense Transportation Contributions District Candidate ad/Rental Expense OTHER (ente	nent/Reimbursement in Equipment & Related Expense /Donations Made By /Officeholder/Political Committee or a category not listed above)
1 PAGE# Schedule: 4/17 F	2 FILER NAME Troxclair, Ellen (Mrs.)		3 ACCOUNT # (TEC filers) 00000001
4 Date 09/26/2014	5 Payee name Piryx		
6 Amount (\$) \$11.50	7 Payee address City; State; Zip Code 144 2nd St. San Francisco, CA 90105		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	credit card processing fe	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Check if Austin, TX, officehol Office sought:	der living expense Office held:
Date 09/27/2014	Payee name Piryx		
Amount (\$)	Payee address City; State; Zip Code		
\$2.88	144 2nd St. San Francisco, CA 90105		
PURPOSE OF	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outsid credit card processing fe	e of Texas, complete Schedule T) 🔲 e
EXPENDITURE		Check if Austin, TX, officehol	der living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 09/27/2014	Payee name Piryx		
Amount (\$)	Payee address City; State; Zip Code		
\$2.88	144 2nd St. San Francisco, CA 90105		
PURPOSE OF	Category (See Categories listed at the top of this schedule) Fees	Description (It travel outsic credit card processing fe	le of Texas, complete Schedule T)
EXPENDITURE	1	Check if Austin, TX, officehol	der living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 09/28/2014	Payee name Piryx		
Amount (\$)	Payee address City; State; Zip Code		<u> </u>
\$12.94	144 2nd St. San Francisco, CA 90105		
PURPOSE OF	Category (See Categories listed at the top of this schedule) Fees	Description (if travel outsic credit card processing fe	le of Texas, complete Schedule T)
EXPENDITURE		Check if Austin, TX, officehol	der living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

POLITIC	AL EXPENDITURES		SCHEDULE F
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ing Legal Services Solicitat nse Food/Beverage Expense Travel C Potting Expense Travel C Printing Expense Office C	s/Wages/Contract Labor Loan Repaymerion/Fundraising Expense Transportation District Contributions/Load Of District Candidate/Contributions/Load Of District Candidate/Contributions/Load Of District Candidate/Contributions	ent/Reimbursement Equipment & Related Expense Donations Made By Officeholder/Political Committee a category not listed above)
1 PAGE# Schedule: 5/17 F	2 FILER NAME Troxclair, Ellen (Mrs.)		3 ACCOUNT # (TEC filers) 00000001
4 Date	5 Payee name		
09/28/2014 6 Amount (\$) \$12.94	Piryx 7 Payee address City; State; Zip Code 144 2nd St. San Francisco, CA 90105	e	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sched Fees	credit card processing fee	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Check if Austin, TX, officehold Office sought:	er living expense Office held:
Date	Payee name		
09/30/2014 Amount (\$)	Piryx Payee address City; State; Zip Cod.	0	·
\$5.75	1		
PURPOSE OF	Category (See Categories listed at the top of this sched Fees	ule) Description (If travel outside credit card processing fee	of Texas, complete Schedule T)
EXPENDITURE		Check if Austin, TX, officehold	er living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 09/30/2014	Payee name Piryx		
Amount (\$)	Payee address City; State; Zip Code	<u> </u>	
\$2.88	144 2nd St. San Francisco, CA 90105		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sched Fees	lule) Description (If travel outside credit card processing fee	of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Check if Austin, TX, officehold Office sought:	or living expense Office held:
Date	Payee name		-
09/30/2014 Amount (\$)	Piryx Payee address City; State; Zip Cod	<u> </u>	
\$2.88	l	·	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sched Fees	Description (If travel outside credit card processing fee	of Texas, complete Schedule T)
		Check if Austin, TX, officehold	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

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

PURPOSE

EXPENDITURE

Complete ONLY if

direct expenditure to benefit C/OH

Fees

Candidate / Officeholder name

(If travel outside of Texas, complete Schedule T)

Office held:

Description

credit card processing fee

Office sought:

Check if Austin, TX, officeholder living expense

POLITIC	AL EXPENDITURES	SCHEDULE F
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ing Legal Services Solicitation/Fun ise Food/Beverage Expense Travel In District Polling Expense Travel Out Of D Printing Expense Office Overhead The Instruction Guide explains he	/Contract Labor draising Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Istrict Candidate/Officeholder/Political Committee Candidate Committee Candidate Committee
1 PAGE# Schedule: 7/17 F	I I	3 ACCOUNT # (TEC filers) 00000001
4 Date 10/07/2014	5 Payee name Piryx	
6 Amount (\$) \$40.25	7 Payee address City; State; Zip Code 144 2nd St. San Francisco, CA 90105	<u>.</u>
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) credit card processing fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 10/08/2014	Payee name Piryx	
Amount (\$) \$20.13	Payee address City; State; Zip Code 144 2nd St. San Francisco, CA 90105	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (II travel outside of Texas, complete Schedule T) credit card processing fee Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 10/08/2014	Payee name Piryx	
Amount (S) \$20.13	Payee address City; State; Zip Code 144 2nd St. San Francisco, CA 90105	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) credit card processing fee Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 10/10/2014	Payee name Piryx	
Amount (\$) \$1.44	Payee address City: State; Zip Code 144 2nd St. San Francisco, CA 90105	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) credit card processing fee Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:

POLITIC	AL EXPENDITURES	SCHEDULE F
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ng Legal Services Solicitation/Fundrais	ntract Labor sing Expense Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee what Expense OTHER (enter a category not listed above)
1 PAGE# Schedule: 8/17 F	2 FILER NAME	3 ACCOUNT # (TEC lilers) 00000001
4 Date 10/10/2014	5 Payee name Piryx	
6 Amount (\$) \$20.13	7 Payee address City; State; Zip Code 144 2nd St. San Francisco, CA 90105	
8 PURPOSE OF EXPENDITURE	(a) Calegory (See Categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) credit card processing fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 10/10/2014	Payee name Piryx	
Amount (\$) \$1.44	Payee address City; State; Zip Code 144 2nd St. San Francisco, CA 90105	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If Iravel outside of Texas, complete Schedule T) credit card processing fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
Date 10/13/2014	Payee name Piryx	
Amount (\$) \$8.63	Payee address City: State; Zip Code 144 2nd St. San Francisco, CA 90105	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) credit card processing fee Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 10/14/2014	Рауее пате Piryx	
Amount (\$) \$5.75	Payee address City; State; Zip Code 144 2nd St. San Francisco, CA 90105	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texes, complete Schedule T) credit card processing fee Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:

POLITIC	AL EXPENDITURES		SCHEDULE F
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	nse Gifts/Awards/Memorial Expense ing Legal Services nse Food/Beverage Expense Polling Expense Printing Expense	TURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Fental Expense the explains how to complete this	Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) form.
1 PAGE# Schedule: 9/17 F			3 ACCOUNT # (TEC filers) 00000001
4 Date 10/14/2014	5 Payee name Piryx		
6 Amount (\$) \$1.44	7 Payee address City; State; Z 144 2nd St. San Francisco, CA 90105	ip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Fees		(If travel outside of Texas, complete Schedule T) processing fee
		Check if Aus	tin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office s	ought: Office held:
Date 10/14/2014	Payee name Piryx		
Amount (\$)	· ·	ip Code	
\$8.63	144 2nd St. San Francisco, CA 90105		
PURPOSE OF	Category (See Categories listed at the top of the Fees		(If travel outside of Texas, complete Schedule T) processing fee
EXPENDITURE		Check if Aus	tin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office s	
Date 10/15/2014	Payee name Piryx		
Amount (\$)	Payee address City; State; Z	ip Code	·
\$1.44	144 2nd St. San Francisco, CA 90105		
PURPOSE OF	Category (See Categories listed at the top of th Fees	is schedule) Description credit card	(If travel outside of Texas, complete Schedule T) processing fee
EXPENDITURE		Check if Aus	nin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office s	ought: Office held:
Date	Payee name		
10/16/2014 Amount (\$)	Piryx Payee address City; State; Z	'in Code	
\$5.75	144 2nd St. San Francisco, CA 90105	w voic	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of the Fees	credit card	processing fee
Complete Carrier	Condidate / Officet-14		ntin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office s	ought: Office held:

POLITIC	AL EXPENDITURES		SCHEDULE F
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	nse Gitts/Awards/Memorial Expense Salai ing Legal Services Solic nse Food/Beverage Expense Travi Polling Expense Offic	itation/Fundraising Expense Transportation of In District Contributions/I of Out Of District Cendidate/C	ent/Reimbursement Equipment & Related Expense Jonations Made By Micieholder/Political Committee a category not listed above)
1 PAGE# Schedule: 10/17	Report: 23/30 2 FILER NAME Troxclair, Ellen (Mrs.)		3 ACCOUNT # (TEC filers) 00000001
4 Date	5 Payee name		
10/17/2014 6 Amount (\$) \$5.75	Piryx 7 Payee address City; State; Zip Co 144 2nd St. San Francisco, CA 90105	ode	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sof Fees	(b) Description (If travel outside credit card processing fee	of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Check if Austin, TX, officehold	or living expense Office held:
Date	Payee name		
10/19/2014	Piryx	***	
Amount (\$) \$5.75	Payee address City; State; Zip Ci 144 2nd St. San Francisco, CA 90105	ode	
PURPOSE OF	Calegory (See Categories listed at the top of this set Fees	Description (If travel outside credit card processing fee	of Texas, complete Schedule T) ☐
EXPENDITURE		Check if Austin, TX, officehold	er living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
10/20/2014	Piryx	· · · · · · · · · · · · · · · · · · ·	
Amount (S) \$1.44	Payee address City; State; Zip Co 144 2nd St. San Francisco, CA 90105	ode	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this set Fees	credit card processing fee	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Check if Austin, TX, officehold Office sought:	Office held:
Dale	Payee name		
10/21/2014	Piryx	ada	
Amount (\$) \$5.75	Payee address City; State; Zip C 144 2nd St. San Francisco, CA 90105	oue	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sof Fees	credit card processing fee	
Complete ON V :	Candidate / Officeholder name	Check if Austin, TX, officehold Office sought:	or living expense Office held:
Complete ONLY if direct expenditure to benefit C/OH	Cardidate / Onicendider Hairle	Onice sought.	Once new.

POLITIC	AL EXPENDITURES	SCHEDULE F
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ing Legal Services Solicitation.h nse Food/Beverage Expense Travel In Dis Polling Expense Travel Out (ges/Contract Labor undraising Expense transportation Equipment & Related Expense transportation Equipment & Related Expense to District lead/Rental Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)
1 PAGE # Schedule: 11/17	2 FILER NAME Troxclair, Ellen (Mrs.)	3 ACCOUNT # (TEC filers) 00000001
4 Date 10/21/2014	5 Payee name Piryx	
6 Amount (\$) \$2.88	7 Payee address City; State; Zip Code 144 2nd St. San Francisco, CA 90105	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description (If travel cutside of Texas, complete Schedule T) credit card processing fee
EXPENDITURE		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	
10/22/2014	Piryx	
Amount (\$) \$8.63	Payee address City; State; Zip Code 144 2nd St. San Francisco, CA 90105	
PURPOSE OF	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Credit card processing fee
EXPENDITURE		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 10/24/2014	Payee name Piryx	
Amount (\$)	Payee address City; State; Zip Code	
\$1.44	144 2nd St. San Francisco, CA 90105	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) credit card processing fee
	On didate I Office helder name	Check if Austin, TX, afficeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 10/24/2014	Payee name Piryx	
Amount (\$) \$1.44	Payee address City; State: Zip Code 144 2nd St. San Francisco, CA 90105	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (It travel outside of Texas, complete Schedule T) credit card processing fee
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:

POLITIC	CAL EXPENDITURES		SCHEDULE F
Advertising Expe Accounting/Banh Consulting Expe Event Expense Fees	nse Food/Beverage Expense Travel In Distr Polling Expense Travel Out Of	es/Contract Labor Loan Repayment/Rein Transportation Equipm of Contributions/Donation Clark Gradidate/Officehol ad/Rental Expense OTHER (enter a category)	nent & Related Expense ns Made By Ider/Political Committee
1 PAGE#	2 FILER NAME	•	CCOUNT # (TEC filers)
Schedule: 12/17	T	I -	0000001
4 Date	5 Payee name		
10/24/2014 6 Amount (\$)	Piryx 7 Payee address City; State; Zip Code		
\$5.75	144 2nd St. San Francisco, CA 90105		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texa credit card processing fee	is, complete Schedule T)
EXI ENDITOTIE		Check if Austin, TX, officeholder living	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name	, ,	
10/24/2014 Amount (\$)	Piryx Payee address City; State; Zip Code		
\$1.44	1 446 10		
PURPOSÉ OF	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texa credit card processing fee	s, complete Schedule T)
EXPENDITURE		Check if Austin, TX, officeholder living	1 avnanca
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
10/24/2014 Amount (\$)	Piryx Payee address City; State; Zip Code		
\$2.88	1440.10		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	credit card processing fee	as, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Check if Austin, TX, officeholder living Office sought:	g expense Office held:
Date	Payee name		
10/24/2014	Píryx		
Amount (\$)	Payee address City; State; Zip Code 144 2nd St.		
\$14.38	San Francisco, CA 90105		
PURPOSE OF	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texa credit card processing fee	as, complete Schedule T)
EXPENDITURE	1	Check if Austin, TX, officeholder living	n aynanca
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

POLITIC	AL EXPENDITURES	SCHEDULE F
	EVACUATION AATE	AANIE
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 Contributions/Donations of the Committee Candidate (Committee Contributions) Candidate (Committee Contributions) Candidate (Contributions)
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC lilers
Schedule: 13/17		00000001
4 Date 10/24/2014	5 Payee name Piryx	•
6 Amount (\$) \$1,44	7 Payee address City; State; Zip Code 144 2nd St. San Francisco, CA 90105	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description (II travel outside of Texas, complete Schedule 1) credit card processing fee
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
09/26/2014	Pizza Hut	
Amount (\$)	Payee address City; State; Zip Code	
\$45.97	2919 Manchaca Road Austin, TX 78704	
PURPOSE OF	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) [food for volunteers
EXPENDITURE		D
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Рауее пате	
10/01/2014	Pizza Hut	
Amount (\$)	Payee address City; State; Zip Code	
\$43.05	2919 Manchaca Road Austin, TX 78704	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) [food for volunteers
		Check If Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Рауее пате	
10/25/2014	Randali's	
Amount (\$) \$5.40	Payee address City; State; Zip Code 6600 S. Mopac Austin, TX 78749	
PURPOSE OF EXPENDITURE	Calegory (See Categories listed at the top of this schedule) Food/Beverage Expense	Description (II travel outside of Texas, complete Schedule T) [Water for volunteers
Complete CMI V 2	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Oniceroliter hame	Onice sought. Onice field.

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 (512)463-5800 TDD 1-800-735-2989 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 fisted above) Gifts/Awards/Memonal Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense Advertising Expense Accounting/Banking Consulting Expense Event Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel to District Travel Out Of District Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. 1 PAGE# FILER NAME 3 ACCOUNT # (TEC lilers) Troxclair, Ellen (Mrs.) Schedule: 14/17 Report: 27/30 00000001 4 Date 5 Payee name 10/24/2014 Square Amount (\$) Payee address City; State: Zip Code 1455 Market St \$2.75 San Francisco, CA 90103 (a) Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) 8 (b) Description **PURPOSE** credit card processing fee **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name 9 Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Target 10/07/2014 Payee address Amount (\$) City; State; Zip Code 2300 W Ben White Blvd \$29.22 Austin, TX 78704 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** printer ink 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 09/30/2014 Thomas Graphics Amount (\$) Pavee address City; State; Zip Code PO Box 142226 \$2,045.93 Austin, TX 78714 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T)

PURPOSE printing campaign materials Printing Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office held: Office sought: direct expenditure to benefit C/OH Date Payee name Thomas Graphics 10/17/2014 City; State; Zip Code Amount (\$) Payee address PO Box 142226 \$1,580.45 Austin, TX 78714 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description printing campaign materials **PURPOSE** Printing 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

Texas Ethics Commission

to benefit C/OH

POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Gifts/Awards/Memorial Expense Legal Services Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Printing Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Travel In District Travel Out Of District Office Overhead/Rental Expense OTHER (enter a category not fisted above) The Instruction Guide explains how to complete this form. 2 FILER NAME 1 PAGE# 3 ACCOUNT # (TEC filers) Troxclair, Ellen (Mrs.) Schedule: 15/17 Report: 28/30 00000001 5 Payee name 4 Date Thomas Graphics 10/17/2014 Amount (\$) Pavee address City; State; Zip Code 6 PO Box 142226 \$313.11 Austin, TX 78714 (a) Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) printing campaign materials 8 (b) Description PURPOSE Printing 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 **Thomas Graphics** 10/17/2014 Payee address Amount (\$) City; State; Zip Code PO Box 142226 \$1,299.00 Austin, TX 78714 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE printing campaign materials Printing 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 USPS 09/26/2014 Amount (\$) Payee address City; State; Zip Code 6104 Old Fredricksburg Road \$88.20 Austin, TX 78749 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** postage Office Overhead/Rental Expense 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 USPS 09/30/2014 Amount (\$) Payee address City; State: Zip Code 8225 Cross Park Dr \$2,236.35 Austin, TX 78710 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** postage Office Overhead/Rental Expense EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure

POLITIC	AL EXPENDITURES		SCHEDULE F
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	nse Gifts/Awards/Memorial Expense Sing Legal Services Sinse Food/Beverage Expense Tolling Expense Printing Expense G	TURE CATEGORIES Salaries/Wages/Contract Labor Solicitetion/Fundraising Expense Fravel In District Fravel Out Of District Diffice Overhead/Rental Expense E explains how to complete this fo	Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)
1 PAGE# Schedule: 16/17	Prile NAME Troxclair, Ellen (Mrs.)	-	3 ACCOUNT # (TEC filers) 00000001
4 Date 10/06/2014	5 Payee name USPS		
6 Amount (\$) \$2,236.35	7 Payee address City; State; Zij 8225 Cross Park Dr Austin, TX 78710	p Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Office Overhead/Rental Expense	postage	(If travel outside of Texas, complete Schedule T)
6 Complete ONE Will	Candidate / Officeholder name		in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Cardioale / Oniceriolder flairte	Office so	ught: Office held:
Date 10/16/2014	Payee name USPS		
10/16/2014 Amount (\$)	Payee address City; State; Zi	p Code	
\$835.02	8225 Cross Park Dr. Austin, TX 78710		
PURPOSE OF	Category (See Categories listed at the top of this Office Overhead/Rental Expense	s schedule) Description postage	(If travel outside of Texas, complete Schedule T)
EXPENDITURE		Chack if Aust	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office so	
Date	Payee name USPS		
10/21/2014 Amount (\$)	Payee address City; State; Zi	p Code	
\$2,239.82	8225 Cross Park Dr. Austin, TX 78710		
PURPOSE OF	Category (See Categories listed at the top of this Office Overhead/Rental Expense	s schedule) Description postage	(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	Payee name		
10/14/2014 Amount (\$)	Vera, Bobby Payee address City; State; Zi	n Code	
\$375.00	Payee address City, State, Zi 818 Craters of the Moon Blvd. Pflugerville, TX 78660	ρ Oute	
PURPOSE	Category (See Categories listed at the top of this Salaries/Wages/Contract Labor	s schedule) Description contract lab	(If travel outside of Texas, complete Schedule T)
OF EXPENDITURE	Calando Tragos/Contract Labor		
Complete ONLY if	Candidate / Officeholder name	Check if Aust Office so	in, TX, officeholder living expense
direct expenditure to benefit C/OH	Surandia / Structioner Halle	Cince su	Onice field.

POLITIC	CAL EXPENDITURES	SCHEDULE F
Advertising Exp Accounting Bant Consulting Expe Event Expense Fees	king Legal Services Solicitation/Fundraising Expense Transportation ense Food/Beverage Expense Travel In District Contributions/L Polling Expense Travel Out 01 District Candidate/L	int/Reimbursemen! Equipment & Related Expense Jonations Made By Officeholder/Political Committee a category not listed above)
1 PAGE# Schedule: 17/17	2 FILER NAME	3 ACCOUNT # (TEC filers) 00000001
4 Date 09/26/2014	5 Payee name Walgreens	
6 Amount (\$) \$10.43	7 Payee address City; State; Zip Code 2501 S. Lamar Blvd. Austin, TX 78704	
8 PURPOSE OF EXPENDITURE	Event Expense event supplies	of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure	Candidate / Officeholder name Candidate / Officeholder name Office sought:	er living expense Office held: