CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction Gu	IDE explains how to complete this form.	1 ACCOUNT # (Ethics Commission filers)	2 PAGE#
		0000011	1 of 30
3 CANDIDATE /	MS/MRS/MR FIRST	MI	OFFICE USE ONLY
OFFICEHOLDER NAME	Darrell		Date Received
	NICKNAME LAST	SUFFIX	ere e
	Pierce		A 2014
- · · · · · · · · · · · · · · · · · · ·	ADDRESS (10 DOV. ACT (0) 175 #.	CITY; STATE; ZIP CODE	1
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT / SUITE #;	CITY, STATE, ZIP GODE	OCT OCT
MAILING ADDRESS	901 East 12th St.		D m̃ ≥
ADDRESS	Austin, TX 78702		Date Hand-delivered or Date Postmarked)
Change of Address			_ ~ ~ ~
_			
			Receipt # Ared Int
5 CAMPAIGN TREASURER	MS/MRS/MR FIRST	МІ	Date Processed &
NAME	Aaron		Date Imaged
	NICKNAME LAST	SUFFIX	
	Demerson	•	
C CANDAIGN			
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PO BOX PLEASE); APT	/ SUITE #; CITY; STATE;	ZIP CODE
ADDRESS (Residence or business)	6019 Roxxbury Lane Austin, TX 78739		•
(Nesidence of business)	Austin, 1X 10735		
7 CAMPAIGN	AREA CODE PHONE NUMBER	EXTENSION	
TREASURER PHONE	(512) 470-6544		,
8 REPORT TYPE	January 15 30th day before	election Runoff	15th day after campaign treasurer
			appointment (officeholder only)
	July 15 X 8th day before e	election Exceeded \$500 limit	Final report (Attach C/OH - FR)
		22000000 4000 111111	
9 PERIOD			
COVERED	Month Day Year	Month Day	Year
	1	HRÖUGH	
	09/26/2014	10/25/20) 14
10 ELECTION	ELECTION DATE ELECTIO	ON TYPE	
	Month Day Year Pr	rimary Runoff X	General Special
	11/04/2014	, , ,	
11 OFFICE	OFFICE HELD (if any)	12 OFFICE SOUGHT (if known	n)
		City Council, Distric	et 8
	GO T	TO PAGE 2	
1			

CANDIDATE / OFFICEHOLDER REPORT:

FORM C/OH

SUPPORT &	IOIALS		COVER	SHEET PG Z
13 C/OH NAME Piero	e, Darrell		14 ACCOUNT # (E 00000011	thics Commission filers)
15 NOTICE FROM	have been made with	otice of political expenditures by political committees to support the ca nout the candidate's or officeholder's knowledge or consent. Candidately receive notice of such expenditures	indidate / officeholder. The les and officeholders are r	ese expenditures may equired to report this
POLITICAL COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL	COMMITTEE ADDRESS		
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME	<u>.</u> . ,	
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS		
		COMMITTEE CAMPAIGN TREASURER ADDRESS		
16 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	960.00
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	16,236.00
EXPENDITURE TOTALS				536.23
	4. TOTAL	POLITICAL EXPENDITURES	\$	26,791.11
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE AY OF THE REPORTING PERIOD	\$	19,500.27
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE AY OF THE REPORTING PERIOD	\$	2,500.00
17 AFFIDAVIT	SUSAN C. HAR Jotary Public, State My Commission E May 16, 201	of Texas xpires	all information require	d to be reported by
	STAMP / SEAL ABOV	Diameter Diameter	this the	97th day
of Characteristics of Characteri		the said	this the	otan)

	The Instruction	N GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/*	14 Report: 3/30
2	FILER NAME	Pierce, Darrell		3 ACCOUNT# 00000011	(Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (ID# Alexander, Hoover		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	10/21/2014	6 Contributor address; City; State; Zip Code 1303 Comal St Austin, TX 78702-1109	:	\$100.00	
		_		(if travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/15/2014	Contributor address; City; State; Zip Code 11412 Pickard Ln Austin, TX 78748-3446		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
		ation / Job title (See Instructions)	Employer (See In		
	Professor		Austin Commur	nity College	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/09/2014	Contributor address; City; State; Zip Code 801 W 5th St Apt 1504		\$350.00	
		Austin, TX 78703-5458		'	Texas, complete Schedule T)
	Advertising C	ation / Job title (See Instructions) FO	Employer (See In Sherry Matthew		· · · · · · · · · · · · · · · · · · ·
	Date	Full name of contributor □ out-of-state PAC (ID# Bethea, Myron	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/21/2014	Contributor address; City; State; Zip Code 17417 Wildrye Dr Austin, TX 78738-4051		\$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)
	10/25/2014	Contributor address; City; State; Zip Code 9102 Sautelle Ln Austin, TX 78749-1145		\$100.00	
		·		(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	·

	The Instruction	on Guide explains how to com	nplete this form		1 PAGE#	· · · · · · · · · · · · · · · · · · ·		
	THE MAIRCOIN	N COIDE EXPIAITS FOW to COIT	piete tina romi.		Schedule: 2/	14 Report: 4/30		
2	FILER NAME	Pierce, Darrell			3 ACCOUNT# 00000011	(Ethics Commission filers)		
4	Date	5 Full name of contributor Black, Kathy	out-of-state PAC (ID#	‡)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable) food & beverages for		
	10/10/2014	6 Contributor address; 1013 Weeping Willow Dr. Austin, TX 78753	City; State; Zip Code	, , , , , , , , , , , , , , , , , , , ,	\$175.00	event		
)			(If travel outside of	Texas, complete Schedule T)		
9	Principal occup	ation / Job title (See Instruction	ns)	10 Employer (See In	structions)			
	Date	Full name of contributor Box, Michael	out-of-state PAC (ID)	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	10/06/2014	Contributor address; PO Box 14592 Austin, TX 78761-4592	City; State; Zip Code		\$200.00	 		
					(If travel outside of	Texas, complete Schedule T)		
	Principal occup Insurance Ag	eation / Job title (See Instruction ent	ns)	Employer (See In Allstate	structions)	·		
	Date	Full name of contributor Brooks, Estelle	out-of-state PAC (ID)	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	10/10/2014	Contributor address; 1405 Strickland Dr Austin, TX 78748-4832	City; State; Zip Code		\$100.00			
					(If travel outside of	Texas, complete Schedule T)		
	Principal occup	eation / Job title (See Instruction	ns)	Employer (See In	structions)			
	Date	Full name of contributor Brown, Glenn	out-of-state PAC (IDs	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	10/04/2014	Contributor address; 128 Amber Ash Dr Kyle, TX 78640-5742	City; State; Zip Code		\$150.00	 		
					(If travel outside of	Texas, complete Schedule T)		
	Principal occup	pation / Job title (See Instruction	ns)	Employer (See In	structions)			
	Date	Full name of contributor Campos, Rene	☐ out-of-state PAC (ID:	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	09/30/2014	Contributor address; PO Box 190914 Dallas, TX 75219-0914	City; State; Zip Code		\$350.00	 		
					(If travel outside of	Texas, complete Schedule T)		
	Principal occup General Parti	L ation / Job title (See Instruction ner	ns)	Employer (See In Residential Inve	structions)	·		
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Texas Ethics Commission

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	The Instruction	אס Guide explains how to complete this form.		1 PAGE # Schedule: 3/	14 Report: 5/30
2	FILER NAME	Pierce, Darrell		3 ACCOUNT# 00000011	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Castetter, Alan)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	10/23/2014	6 Contributor address; City; State; Zip Code 5100 Lassant Cv Austin, TX 78749-2215		\$350.00	
				l . `	Texas, complete Schedule T)
9	Principal occup Owner	eation / Job title (See Instructions)	10 Employer (See In US Legal Suppo		•
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/16/2014	Contributor address; City; State; Zip Code 1775 N Warm Springs Rd Salt Lake City, UT 84116-2353		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Real estate	vation / Job title (See Instructions)	Employer (See In Self-employed	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/23/2014	Contributor address; City; State; Zip Code 3203 Funston St Austin, TX 78703-1333		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occuş Administrator	eation / Job title (See Instructions)	Employer (See In Seton Healthca		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/26/2014	Contributor address; City; State; Zip Code 10308 Rhett Butler Dr Austin, TX 78739-1672		\$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)
	09/27/2014	Contributor address; City; State; Zip Code 7208 Squirrel Oak Cir Austin, TX 78749-2334		\$100.00	! ! !
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In		
					

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	The Instruction	N GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/	14 Report: 6/30
2	FILER NAME	Pierce, Darrell		.3 ACCOUNT# 00000011	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Ehrlich, Robert)	7 Amount of contribution (\$)	8
	10/23/2014	6 Contributor address; City; State; Zip Code 1601 W 38th St 206	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$250.00	
		Austin, TX 78731-6403		(If travel outside of	Texas, complete Schedule T)
				<u> </u>	
9	Principal occup real estate	eation / Job title (See Instructions)	10 Employer (See In Ehrlich Realty (
	Date	Full name of contributor ut-of-state PAC (ID# Ely, Adele)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/14/2014	Contributor address; City; State; Zip Code 2900 Regents Park Austin, TX 78746-7617	.,	\$100.00	
		Adding TX TOTAC TOTA		(If travel outside of	Texas, complete Schedule T)
	51.1.1	when the Residence in the state of the state			
	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)
	09/30/2014	Contributor address; City; State; Zip Code 708 Tofino Cv		\$100.00	
		Round Rock, TX 78665-5656	٧.	(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)
	10/25/2014	Contributor address; City; State; Zip Code 19317 Blake Manor Rd. Manor, TX 78653		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
\vdash	Principal occur	pation / Job title (See Instructions)	Employer (See In	l	
	i inicipai occup				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/21/2014	Contributor address; City; State; Zip Code 9605 Prescott Dr Austin, TX 78749-5203		\$100.00	
	<u> </u>			(If travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See In	<u> </u>	, -
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	The Instruction	N GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/	14 Report: 7/30			
2	FILER NAME	Pierce, Darrell		3 ACCOUNT# 00000011	(Ethics Commission filers)			
4	Date	5 Full name of contributor ut-of-state PAC (ID# Guess, Nicole)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
	10/20/2014	6 Contributor address; City; State; Zip Code 801 S Polk St Apt 1118 Desoto, TX 75115-7579		\$100.00	 - -			
				(If travel outside of	Texas, complete Schedule T)			
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	10/24/2014	Contributor address; City; State; Zip Code 1212 Guadalupe St Austin, TX 78701-1837		\$350.00	! ! !			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occur	eation / Job title (See Instructions)	Employer (See In	structions)				
	consultant		HMWK, LLC	,				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	09/30/2014	Contributor address; City; State; Zip Code PO Box 190914 Dallas, TX 75219-0914		\$350.00	1 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup Part-time em	ation / Job title (See Instructions) ployee	Employer (See In Sunstone Cons	,				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	10/10/2014	Contributor address; City; State; Zip Code PO Box 91463 Austin, TX 78709-1463		\$350.00	 			
				'	Texas, complete Schedule T)			
	Principal occup President	eation / Job title (See Instructions)	Employer (See In John Hall Public					
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	10/25/2014	Contributor address; City; State; Zip Code 17531 Bishopsgate Dr Pflugerville, TX 78660-1729		\$300.00	 			
				(If travel outside of	Texas, complete Schedule T)			
\vdash	Deimain of a con-	eties / Joh title (Coo legtwetters)	Employee (Cooking	L `	. v.au, vemplete buildade 1/			
	Principal occup Manager	ation / Job title (See Instructions)	Employer (See In Dell	Structions)				

	The Instruction	אס Guide explains how to complete this form.		1 PAGE # Schedule: 6/	14 Report: 8/30			
2	FILER NAME	Pierce, Darrell	Λ.	3 ACCOUNT# 00000011	(Ethics Commission filers)			
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Haywood, Shonda)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
	10/25/2014	6 Contributor address; City; State; Zip Code 6117 Ponca St. Austin, TX 78741		\$100.00	[[]			
			. ,	(If travel outside of	Texas, complete Schedule T)			
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	V			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	10/14/2014	Contributor address; City; State; Zip Code 2712 Regents Park Austin, TX 78746-6843		\$350.00	 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup Tenant Repre	ation / Job title (See Instructions) esentation	Employer (See In JLL	structions)	•			
	Date	Full name of contributor	·	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	10/25/2014	Contributor address; City; State; Zip Code 1018 Canyon View Rd. Dripping Springs, TX 78620		\$350.00	 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup Project Mana	ation / Job title (See Instructions) ger	Employer (See In Legend Commu					
	Date	Full name of contributor	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	10/01/2014	Contributor address; City; State; Zip Code 1811 Kirby Dr Houston, TX 77019-3415		\$350.00	 			
				<u> </u>	Texas, completé Schedule T)			
	Principal occup Founder/Pres	ation / Job title (See Instructions) ident	Employer (See In Capital Point Pa					
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	10/23/2014	Contributor address; City; State; Zip Code 131 Bullard Cir Rockville, MD 20850-3816		\$100.00				
	-			(If travel outside of	Texas, complete Schedule T)			
	Principal occup	ation / Job title (See Instructions)	Employer (See In	<u> </u>	. ,			
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	The Instruction	N GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/1	4 Report: 9/30			
2	FILER NAME	Pierce, Darrell		3 ACCOUNT # 00000011	(Ethics Commission filers)			
4	Date	5 Full name of contributor	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
	10/02/2014	6 Contributor address; City; State; Zip Code 8406 Cornerwood Dr Austin, TX 78717-5337		\$350.00	 			
				(If travel outside of	Texas, complete Schedule T)			
9	Principal occup Senior ROW	ation / Job title (See Instructions) Agent	10 Employer (See In Contract Land S					
	Date	Full name of contributor	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	10/16/2014	Contributor address; City; State; Zip Code 4700 Gold Flower Holw Austin, TX 78731-3653		, \$200.00	[[[
				(If travel outside of	Texas, complete Schedule T)			
-	Principal occup Vice Presider	ation / Job title (See Instructions) It of Advocacy and Education	Employer (See In Lutheran Social	structions) I Services of the S	outh			
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	10/22/2014	Contributor address; City; State; Zip Code 2400 Givens Ave Austin, TX 78722-2105		\$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)			
	10/25/2014	Contributor address; City; State; Zip Code 4302 Lakeway Blvd. Lakeway, TX 78734		\$350.00	! ! !			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup Project Mana	ation / Job title (See Instructions) ger	Employer (See In Legend Commu					
	Date	Full name of contributor	#) ·	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	10/25/2014	Contributor address; City; State; Zip Code 801 Laurel ST. Bastrop, TX 78602		\$100.00	 			
				(If travel outside of	Texas, complete Schedule T)			
 	Principal occup	eation / Job title (See Instructions)	Employer (See In	1				
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Texas Ethics Commission

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	The Instruction	GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/1	14 Report: 10/30
2	FILER NAME	Pierce, Darrell		3 ACCOUNT # 00000011	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (tD Lewis, Willie	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	10/10/2014	6 Contributor address; City; State; Zip Code 5708 Springdale Rd Austin, TX 78723-3661		\$250.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Retired	ation / Job title (See Instructions)	10 Employer (See In Retired	structions)	
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/10/2014	Contributor address; City; State; Zip Code 8320 Twilight Teπace Dr Austin, TX 78737-3533		\$200.00	
				'	Texas, complete Schedule T)
	Principal occup Owner	ation / Job title (See Instructions)	Employer (See In Ellis and Salaza		
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/03/2014	Contributor address; City; State; Zip Code 8299 Cambridge St Apt 1106		\$300.00	
		Houston, TX 77054-3150		(If travel outside of	Texas, complete Schedule T)
	Principal occup Administrative	ation / Job title (See Instructions) e Assistant	Employer (See In Capital Point Pa		
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/07/2014	Contributor address; City; State; Zip Code 7104 Mesa Dr Austin, TX 78731-2102		\$300.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Dentist	ation / Job title (See Instructions)	Employer (See in Self Employed	structions)	
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/24/2014	Contributor address; City; State; Zip Code 2603 N Shields Dr Austin, TX 78727-3123		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	

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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 9/	14 Report: 11/30
2	FILER NAME	Pierce, Darrell		3 ACCOUNT# 00000011	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Moore, Everett	 	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	10/25/2014	6 Contributor address; City; State; Zip Code PO Box 5504 Round Rock, TX 78683		\$350.00	
					Texas, complete Schedule T)
9	Principal occup Bus Driver	pation / Job title (See Instructions)	10 Employer (See In Cap Metro	structions)	·
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/15/2014	Contributor address; City; State; Zip Code 17213 Poncho Springs Ln Austin, TX 78717-2966		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occur	I	Employer (See In	L.:	
	•				
	Date	Full name of contributor	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/12/2014	Contributor address; City; State; Zip Code 830 W 3rd St Ste 2303		\$100.00	
	·	Austin, TX 78701-3869		(If travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
	Date	. Full name of contributor □ out-of-state PAC (ID# Parikh, Sarijay	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/15/2014	Contributor address; City; State; Zip Code 105 Wigeon Cv Cedar Park, TX 78613-4080	,	\$51.00	
			5 to (O to		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)
	10/13/2014	Contributor address; City; State; Zip Code 5918 Lookout Mountain Dr Austin, TX 78731-3658		\$100.00	1
			•	(If travel outside of	Texas, complete Schedule T)
	Principal occup	 pation / Job title (See Instructions)	Employer (See Ir	<u> </u>	
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	The Instruction	N Guide explains how to complet	e this form.		1 PAGE#	/14 Report: 12/30		
2	FILER NAME	Pierce, Darrell			3 ACCOUNT # 00000011	(Ethics Commission filers)		
4	Date	5 Full name of contributor Patel, Ina	out-of-state PAC (ID#_)	7 Amount of contribution (\$)	8		
	10/12/2014	6 Contributor address; City 2911 Regents Park Austin, TX 78746	r; State; Zip Code		\$150.00	l 		
					(If travel outside of	Texas, complete Schedule T)		
9	Principal occup	ation / Job title (See Instructions)		10 Employer (See Inc	structions)			
	Data	Full name of contributor	out of state DAC (ID#		Amount of	In-kind contribution		
	Date	Patel, Rashmika Jignesh	out-oi-state PAC (ID#,	,	contribution (\$)	description (if applicable)		
	10/15/2014	Contributor address; City 10313 Broomflower Dr Austin, TX 78739-1448	r; State; Zip Code		\$350.00	 		
		7434III, 174 FOT 00 1440				· · · · · · · · · · · · · · · · · · ·		
						Texas, complete Schedule T)		
	Principal occup Grocer	ation / Job title (See Instructions)		Employer (See Ins Self Employed	structions)			
	Date	Full name of contributor Pierce, Alvin	out-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)		
	09/29/2014	2887 Lynda Pl	y; State; Zip Code		, '\$200.00	1		
		Decatur, GA 30032-5759			(If travel outside of	Texas, complete Schedule T)		
	Principal occup Owner	ation / Job title (See Instructions)		Employer (See In Lawn Company				
	Date	Full name of contributor D	out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	10/25/2014	Contributor address; City 8113 Billy Bonney Ct Austin, TX 78749-2748	r; State; Zip Code	, , , , , , , , , , , , , , , , , , , ,	\$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 Pressley, Carlton	out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	10/21/2014	Contributor address; City 8741 Bancroft Dr Waldorf, MD 20603-4031	y; State; Zip Code		,\$100.00	 		
		1720001, ND 2000-7001			DE humanista and a second	l		
_	B	R 7 to b. Ref. (C = 1 - 2 - C		Familian (San In	<u> </u>	Texas, complete Schedule T)		
	Principal occur	pation / Job title (See Instructions)		Employer (See In	SIRUCIIONS)	•		

P.O.Box 12070

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The Instruction Guide explains how to complete this form.				1 PAGE # Schedule: 11	/14 Report: 13/30	
2	FILER NAME	ILER NAME Pierce, Darrell		3 ACCOUNT # (Ethics Commission filers) 00000011		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Reagan, Daniel)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	10/21/2014	6 Contributor address; City; State; Zip Code 1939 E Laird Dr Salt Lake City, UT 84108-1822		\$350.00	 	
				(If travel outside of Texas, complete Schedule T)		
9	Principal occup advertising ex	ation / Job title (See Instructions) (ecutive		Employer (See Instructions) Reagan National Advertising		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	10/16/2014	Contributor address; City; State; Zip Code 1775 N Warm Springs Rd Salt Lake City, UT 84116-2353		\$350.00	l 	
		Sail Lake City, 01 04110-2303		(If traum) mutaida -4	Tayas complete Schodule Ti	
<u> </u>	Principal occur	ation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule T)	
	managing dire		Reagan Nationa			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	10/21/2014	Contributor address; City; State; Zip Code 1939 E Laird Dr Salt Lake City, UT 84108-1822		\$350.00		
Sait Lake City, UT 84108-1822			(If travel outside of	Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions) Homemaker		ation / Job title (See Instructions)	Employer (See In n/a	structions)		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
10/16/2014 Contributor address; City; State; Zip Code 4100 McBrine Pl Austin, TX 78746-1928		4100 McBrine PI		\$350.00	 	
				(If travel outside of	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Homemaker		Employer (See In NA	structions)			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	10/16/2014	Contributor address; City; State; Zip Code 4100 McBrine Pl Austin, TX 78746-1928		· \$350.00] 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup Advertising	ation / Job title (See Instructions)	Employer (See In Reagan Nationa			

The Isstruction Guici explains how to complete this form. 1 PAGE # Schedule: 12/14 Report: 14/30 2 PILER NAME Pierce, Derreil 3 Account # (Elinic Commission filers) 00000011 4 Date 5 Full name of contributor out-of-state PAC (ID# 7 Amount of 8 In-kind contribution (\$ 10/12/2014 6 Contributor address; 25/15 Regents PAC (Ely: State: Zip Code \$350.00 350.0									
Date S Full name of contributor cut-of-state PAC (ID# 7 Amount of contribution (8) 8 In-kind contribution (9) 10/12/2014 6 Contributor address. City. State. Zip Code \$350.00 350.00 350.00 250.00 350.00	The INSTRUCTION GUIDE explains how to complete this form.				="	/14 Report: 14/30			
Reese, Donald 10/12/2014 6 Contributor address; 2914 Regents Park Assit, 17-74746-177 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) In-kind contribution (if applicable)	2	FILER NAME	Pierce, Darrell				(Ethics Commission filers)		
29 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Self Employer (See Instructions) 10 Employer (See Instructions) Self Employer (See Instru	4	Date		PAC (ID# __)				
Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Self Employed		10/12/2014	2914 Regents Park	p Code	,,,,,,,	\$350.00	 		
Date Full name of contributor Out-of-state PAC (ID# Amount of Contribution (\$) In-kind contribution (\$) description (if applicable)						(If travel outside of	Texas, complete Schedule T)		
Reese, Gina 10/12/2014	9		ation / Job.title (See Instructions)			structions)			
2914 Regents Park Austin, TX 78746-7617 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of contribution (\$) In-kind contribution (\$) O9/26/2014 Contributor address; City; State; Zip Code 217 S Jackson St Unit F Derwer, CO 80209-3132 Contributor address; City; State; Zip Code 217 S Jackson St Unit F Derwer, CO 80209-3132 Contributor address; City; State; Zip Code 217 S Jackson St Unit F Derwer, CO 80209-3132 Contributor address; City; State; Zip Code 217 S Jackson St Unit F Derwer, CO 80209-3132 Contributor address; City; State; Zip Code 217 S Jackson St Unit F Derwer, CO 80209-3132 Contributor address; City; State; Zip Code 217 S Jackson St Unit F Derwer, CO 80209-3132 Contributor address; City; State; Zip Code 217 S Jackson St Unit F Derwer, CO 80209-3132 City State; Zip Code 217 S Jackson St Unit F Derwer, CO 80209-3132 City State; Zip Code 318 Derwer, CO 80209-3132 City State; Zip Code 3250.00 Contribution (\$) Co		Date		PAC (ID#)				
Principal occupation / Job title (See Instructions) Homemaker Date		10/12/2014	2914 Regents Park	p Code		\$350.00	 		
Principal occupation / Job title (See Instructions) Homemaker Date	Ì				,	(If travel outside of	Texas, complete Schedule T)		
Date	\vdash	Principal occup	ation / Job title (See Instructions)		Employer (See In:				
Singleton, Jennifer Contributor address: City: State: Zip Code 217 S Jackson St Unit F Denver, CO 80209-3132		Homemaker			Not Employed				
Principal occupation / Job title (See Instructions) Employer (See Instructions) requested		Date		PAC (ID#)				
Deriver, CO 80209-3132 (if travel outside of Texas, complete Schedule T)		09/26/2014	217 S Jackson St	p Code		, \$350.00	! !		
Pate Full name of contributor Out-of-state PAC (ID# Out-of-state PAC (Denver, CO 80209-3132			<u> </u>	I Texas, complete Schedule T)		
Singleton, Rasheed Contribution (\$) description (if applicable) Contributor address; City; State; Zip Code 217 S Jackson St Unit F Denver, CO 80209-3132 Principal occupation / Job title (See Instructions) Physician Employer (See Instructions) Surgery Partners Employer (See Instructions) Surgery Partners Amount of contribution (\$) In-kind contribution description (if applicable) 10/09/2014 Contributor address; City; State; Zip Code 1807 Apricot Glen Dr Austin, TX 78746-7850 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions)			ation / Job title (See Instructions)			structions)			
217 S Jackson St Unit F Denver, CO 80209-3132 Principal occupation / Job title (See Instructions) Physician Date Full name of contributor Stevens, Johnny Contributor address; City; State; Zip Code 1807 Apricot Glen Dr Austin, TX 78746-7850 Principal occupation / Job title (See Instructions) [If travel outside of Texas, complete Schedule T)		Date ,		PAC (ID#)				
Principal occupation / Job title (See Instructions) Physician Date Full name of contributor Stevens, Johnny Contributor address; City; State; Zip Code 1807 Apricot Glen Dr Austin, TX 78746-7850 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of contribution description (if applicable) Contributor address; City; State; Zip Code 1807 Apricot Glen Dr Austin, TX 78746-7850 (If travel outside of Texas, complete Schedule T)		09/26/2014	217 S Jackson St Unit F	p Code			 - -		
Physician Date Full name of contributor Stevens, Johnny Contributor address; City; State; Zip Code 1807 Apricot Glen Dr Austin, TX 78746-7850 Principal occupation / Job title (See Instructions) Surgery Partners Amount of In-kind contribution contribution (\$) description (if applicable) Contributor address; City; State; Zip Code \$250.00 (If travel outside of Texas, complete Schedule T)				<u> </u>		L	Texas, complete Schedule T)		
Stevens, Johnny Contribution (\$) description (if applicable) 10/09/2014 Contributor address; City; State; Zip Code \$250.00 1807 Apricot Glen Dr Austin, TX 78746-7850 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)			etion / Job title (See Instructions)						
1807 Apricot Glen Dr Austin, TX 78746-7850 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)		Date		PAC (ID# _.)	Amount of contribution (\$)			
(If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)		10/09/2014	1807 Apricot Glen Dr	ip Code		\$250.00	I I I		
Principal occupation / Job title (See Instructions) Employer (See Instructions)				•		(If travel outside of	Texas, complete Schedule T)		
						structions)			

The Instruction Guide explains how to complete this form.				1 PAGE# Schedule: 13	1/14 Report: 15/30			
2	FILER NAME	Pierce, Darrell		3 ACCOUNT# 00000011	(Ethics Commission filers)			
4	Date	5 Full name of contributor ut-of-state PAC (ID# White, Melvin	<u> </u>	7 Amount of contribution (\$)	8			
	10/24/2014	6 Contributor address; City; State; Zip Code 809 Windsor Hill Dr Pflugerville, TX 78660-8058		\$100.00	 			
				(If travel outside of	Texas, complete Schedule T)			
9	Principal occup	Principal occupation / Job title (See Instructions) 10 Employer (See Instructions)						
	Date	Full name of contributor ut-of-state PAC (ID# White, Sidney Jr.)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	10/07/2014	Contributor address; City; State; Zip Code 2113 E Martin Luther King Jr Blvd Ste 105		\$100.00	 			
		Austin, TX 78702-1357			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)			
	10/12/2014	Contributor address; City; State; Zip Code 1805 Stoneridge Ter Austin, TX 78746-7733		\$350.00	1			
					Texas, complete Schedule T)			
	Principal occup Owner	ation / Job title (See Instructions)	Employer (See In South Austin Pr	,				
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	10/12/2014	Contributor address; City; State; Zip Code 1805 Stoneridge Ter Austin, TX 78746-7733		\$350.00				
				distance autoido of	Tayon complete Schodule T\			
	Dinahal assure	ation / Job title (See Instructions)	Employer/Coolin	<u> </u>	Texas, complete Schedule T)			
	Physician	adon / Job dae (See instructions)	Employer (See In Austin Pain Ass					
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	10/05/2014	Contributor address; City; State; Zip Code 10607 Londonshire Ln Austin, TX 78739-1645		\$350.00	 			
				(If travel outside of	Texas, complete Schedule T)			
Principal occupation / Job title /See Instructions		Employer (See In						
Principal occupation / Job title (See Instructions) Homemaker			Homemaker	ion denoting				

	OTHER THAN PLEDGES OR LOANS					
	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 14/	14 Report: 16/30	
2	2 FILER NAME Pierce, Darrell		3 ACCOUNT # 00000011	(Ethics Commission filers)		
4	Date 5 Full name of contributor		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	10/05/2014	6 Contributor address; City; State; Zip Code 6107 Tasajillo Trl Austin, TX 78739-1412		\$100.00		
				(If travel outside of l	Texas, complete Schedule T)	
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)		
	Date	Full name of contributor ☐ out-of-state PAC (ID# Zimmermann, Kay	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	10/19/2014	Contributor address; City; State; Zip Code 6915 Robert Dixon Dr Austin, TX 78749-2268		 \$100.00 		
				. (If travel outside of ∃	「exas, complete Schedule T) ✓☐	
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)		

LOANS SCHEDULE E 1 PAGE# The Instruction Guide explains how to complete this form. Schedule: 1/1 Report: 17/30 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Pierce, Darrell 00000011 4 TOTAL OF UNITEMIZED LOANS: ದ ದ ದ ದ ದ ದ ದ \$ 9 Loan Amount (\$) 5 Date of loan Name of lender out-of-state PAC (ID#_ Pierce, Darrell \$5,000.00 09/26/2014 6 Is lender a 8 Lender address; City; State; Zip Code 10 Interest rate financial Institution? 901 East 12th St. Austin, TX 78702 11 Maturity date No 11/04/2014 12 Principal occupation / Job title (See Instructions) 13 Employer (See Instructions) 14 Description of Collateral 15 Check if personal funds were deposited into political account X X none 16 GUARANTOR 17 Name of guarantor 19 Amount Guaranteed (\$) **INFORMATION** 18 Guarantor address; City; State; Zip Code not applicable 20 Principal Occupation 21 Employer

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

EXPENDITURE CATEGORIES

anse Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District

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

Event Expense Fees	Polling Expense Travel Out Of D Printing Expense Office Overhead	istrict Candidate/Officeholder/Political Committee 1/Rental Expense OTHER (enter a category not listed above)		
The Instruction Guide explains how to complete this form.				
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)		
Schedule: 1/12 F	eport: 18/30 Pierce, Darrell	00000011		
4 Date	5 Payee name			
09/30/2014	BOAZ Enterprises			
6 Amount (\$)	7 Payee address City; State; Zip Code			
\$650.00	1701 Intervail Dr.			
	Austin, TX 78746	,		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(If travel outside of Texas, complete Schedule T) Consulting		
OF	Consulting Expense	Consulting		
EXPENDITURE		<u></u>		
A 0 1 4 0 11 1/2 1/2	Candidate / Office balder agency	Check if Austin, TX, officeholder Ilving expense Office sought: Office held:		
9 Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought. Office netd.		
to benefit C/OH		· .		
Date	Payee name			
10/01/2014	Burke, Clifford			
Amount (\$)	Payee address City; State; Zip Code			
\$145.00	13359 Pond Springs Rd. #714			
\$ 10.00	Austin, TX 78729			
i				
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)		
PURPOSE OF	Salaries/Wages/Contract Labor	contract labor		
EXPENDITURE				
		Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:		
. to benefit C/OH	•	<u></u>		
Date	Payee name			
10/07/2014	Burke, Clifford			
Amount (\$)	Payee address City; State; Zip Code			
\$40.00	13359 Pond Springs Rd. #714			
ψ+0.00	Austin, TX 78729			
		. <u>_</u>		
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)		
PURPOSE OF	Salaries/Wages/Contract Labor	contract labor		
EXPENDITURE		<u> </u>		
		Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:		
to benefit C/OH				
Date	Payee name			
10/13/2014	Burke, Clifford			
Amount (\$)	Payee address City; State; Zip Code			
\$180.00	13359 Pond Springs Rd. #714			
\$100.00	Austin, TX 78729			
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)		
PURPOSE	Salaries/Wages/Contract Labor	contract labor		
OF EXPENDITURE	*	<u> </u>		
		Check if Austin, TX, officeholder living expense		
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:		
direct expenditure to benefit C/OH				

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

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

EXPENDITURE CATEGORIES

salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District

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

Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 2 FILER NAME 3 ACCOUNT # (TEC filers) PAGE # Pierce, Darrell 00000011 Schedule: 2/12 Report: 19/30 ▲ Date 5 Payee name 10/20/2014 Burke, Clifford City; State; Zip Code 6 Amount (\$) Payee address 13359 Pond Springs Rd. #714 \$150.00 Austin, TX 78729 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 **PURPOSE** contract labor Salaries/Wages/Contract Labor OF **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 10/07/2014 Chatman, Michaiah Payee address City; State; Zip Code Amount (\$) 2450 Buttonhill Dr. \$40.00 Missouri City, TX 77489 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** contract labor Salaries/Wages/Contract Labor 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 Chatman, Michaiah 10/13/2014 Payee address Amount (\$) City; State; Zip Code 2450 Buttonhill Dr. \$40.00 Missouri City, TX 77489 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** contract labor Salaries/Wages/Contract Labor OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officehölder name Office sought: Office held: direct expenditure to benefit C/OH Date Pavee name Chatman, Michaiah 10/20/2014 Amount (\$) Payee address City; State; Zip Code 2450 Buttonhill Dr. \$15.00 Missouri City, TX 77489 (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 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Gifts/Awards/Mernorial Expense Legal Services Food/Beverage Expense Polling Expense

EXPENDITURE CATEGORIES

anse Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District

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

Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guipe explains how to complete this form. 3 ACCOUNT # (TEC filers) PAGE # FILER NAME Pierce, Darrell 00000011 Schedule: 3/12 Report: 20/30 4 Date 5 Payee name 09/29/2014 Combs, Curtis Amount (\$) Pavee address City; State; Zip Code 6 1515 Wickersham Lane #226 \$330.00 Austin, TX 78741 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 **PURPOSE** contract labor Salaries/Wages/Contract Labor OF EXPENDITURE Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure Date Pavee name 10/07/2014 Combs, Curtis Payee address City; State; Zip Code Amount (\$) 1515 Wickersham Lane #226 \$300.00 Austin, TX 78741 Description (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) **PURPOSE** contract labor Salaries/Wages/Contract Labor OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office held: Complete ONLY if Office sought: direct expenditure to benefit C/OH Date Pavee name Combs, Curtis 10/13/2014 Payee address City; State; Zip Code Amount (\$) 1515 Wickersham Lane #226 \$267.00 Austin, TX 78741 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** contract labor 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 10/20/2014 Combs, Curtis Payee address City; State; Zip Code Amount (\$) 1515 Wickersham Lane #226 \$315.00 Austin, TX 78741 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** contract labor Salaries/Wages/Contract Labor 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

Austin, Texas 78711-2070

EXPENDITURE CATEGORIES

POLITICAL EXPENDITURES

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

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

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel in District Travel Out Of District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) The INSTRUCTION GUIDE explains how to complete this form. 2 FILER NAME 3 ACCOUNT # (TEC filers) 1 PAGE# Pierce, Darrell 00000011 Schedule: 4/12 Report: 21/30 4 Date 5 Payee name 09/28/2014 Cricket Payee address City; State; Zip Code 6 Amount (\$) 149 S. IH 35 \$297.63 New Braunfels, TX 78130 (If travel outside of Texas, complete Schedule T) (a) Category (See Categories listed at the top of this schedule) (b) Description 8 **PURPOSE** Telephone equipment Office Overhead/Rental Expense OF **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 10/03/2014 First Data Amount (\$) Payee address City; State; Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342 \$142.41 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 Candidate / Officeholder name Office sought: Office held: Complete ONLY if direct expenditure to benefit C/OH Date Pavee name First Data 10/03/2014 Pavee address City; State; Zip Code Amount (\$) 5565 Glenridge Connector NE \$149.95 Atlanta, GA 30342 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 Candidate / Officeholder name Office sought: Office held: Complete ONLY if direct expenditure to benefit C/OH Date Payee name 10/03/2014 First Data City; State; Amount (\$) Payee address Zip Code 5565 Glenridge Connector NE \$41.95 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 Candidate / Officeholder name Office sought: Office held: Complete ONLY if direct expenditure to benefit C/OH

EXPENDITURE CATEGORIES

POLITICAL EXPENDITURES

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel in District Travel Out Of District Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)

Fees	Printing Expense Office Overhead. The Instruction Guide explains ho	,
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 5/12 F	Distant Daysoll	00000011
4 Date	5 Payee name	
10/07/2014	Fisher, Amber	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$85.00	5201 Marymount Dr. Austin, TX 78723	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T) contract labor
OF	Salaries/Wages/Contract Labor	COMPACT TABLET
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	
10/13/2014	Fisher, Amber	
Amount (\$)	Payee address City; State; Zip Code	
\$45.00	5201 Marymount Dr. Austin, TX 78723	
PURPOSE OF	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
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	
10/03/2014	Kelly Graphics	
Amount (\$)	Payee address City, State, Zip Code	
\$9,341.03	1322 Lost Creek Blvd. Austin, TX 78746	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Printing Expense	printing, postage & mailing services
OF 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	
09/29/2014	LaFave, Daniel	<u>, , </u>
Amount (\$)	Payee address City; State; Zip Code	
\$330.00	1515 Wickersham Lane #226 Austin, TX 78741	
	Cotagony (See Cotagonics listed at the ten of this pat - 1/1-1	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	contract labor
-ALLHOHORE		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

PURPOSE

OF EXPENDITURE

Complete ONLY if

direct expenditure to benefit C/OH

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

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

Office Overhead/Rental Expense

Candidate / Officeholder name

EXPENDITURE CATEGORIES

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. 1 PAGE# 2 FILER NAME 3 ACCOUNT # (TEC filers) Pierce, Darrell 00000011 Schedule: 6/12 Report: 23/30 4 Date 5 Payee name 10/07/2014 LaFave, Daniel 6 Amount (\$) Payee address City; State; Zip Code 1515 Wickersham Lane #226 \$320.00 Austin, TX 78741 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 **PURPOSE** contract labor Salaries/Wages/Contract Labor OF 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 10/13/2014 LaFave, Daniel Amount (\$) Payee address City; State; Zip Code 1515 Wickersham Lane #226 \$267.00 Austin, TX 78741 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** contract labor Salaries/Wages/Contract Labor 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 Pavee name LaFave, Daniel 10/20/2014 Payee address Amount (\$) City: State Zip Code 1515 Wickersham Lane #226 \$410.00 Austin, TX 78741 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** contract labor Salaries/Wages/Contract Labor 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 Pavee name NGP Van, Inc. 10/02/2014 Amount (\$) Payee address City; State: Zip Code 1101 15th Street, NW, Suite 500 \$250.00 Washington, DC 20005

Description

database software

Office sought:

Check if Austin, TX, officeholder living expense

(If travel outside of Texas, complete Schedule T)

Office held:

Austin, Texas 78711-2070 (512)463-5800 TDD 1-800-735-2989 Texas Ethics Commission P.O.Box 12070 POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Loan Repayment/Reimbursement Advertising Expense Gifts/Awards/Memorial Expense Salaries/Wages/Contract Labor Legal Services Food/Beverage Expense Transportation Equipment & Related Expense Contributions/Donations Made By Accounting/Banking Solicitation/Fundraising Expense Consulting Expense Travel In District Candidate/Officeholder/Political Committee Event Expense olling Expense Travel Out Of District 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# Pierce, Darrell 00000011 Schedule: 7/12 Report: 24/30 4 Date 5 Payee name 09/30/2014 Nunez, Alyssa Payee address City; State; Zip Code Amount (\$) 6307 Bluff Springs Road Apt. # 627 \$750.00 Austin, TX 78744 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 **PURPOSE** Salaries/Wages/Contract Labor OF **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 10/16/2014 Nunez, Alyssa Amount (\$) Payee address City; State; Zip Code 6307 Bluff Springs Road Apt. # 627 \$750.00 Austin, TX 78744 Description (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) **PURPOSE** Salary Salaries/Wages/Contract Labor 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 Pierce, Darrell 10/06/2014 Payee address City; State; Zip Code Amount (\$) 901 East 12th St. \$5,000.00 Austin, TX 78702 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** loan repayment OTHER - repayment of loan 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 10/07/2014 Richardson, Lance City; Zip Code Amount (\$) Payee address State; 4700 E. Riverside Dr. #334 \$40.00 Austin, TX 78741 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** contract labor Salaries/Wages/Contract Labor OF **EXPENDITURE** Check if Austin, TX, officeholder living expense

Complete ONLY if

direct expenditure to benefit C/OH Candidate / Officeholder name

Office held:

Office sought:

EXPENDITURE CATEGORIES

38 Ethics Commission	F.O.DOX 12070	Austin,	10/02/01	11-207
POLITICAL EXP	PENDITURES	•		

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

Complete ONLY if

direct expenditure to benefit C/OH

Candidate / Officeholder name

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

Salaries/Wages/Contract Labor Solicitation/Fundralsing Expense Travel In District Travel Out Of District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

Office Overhead/Rental Expense OTHER (enter a category not listed above) Fees The Instruction Guide explains how to complete this form. PAGE # 3 ACCOUNT # (TEC filers) FILER NAME Pierce, Darrell 00000011 Schedule: 8/12 Report: 25/30 4 Date 5 Payee name 10/20/2014 Richardson, Lance 6 Amount (\$) Payee address City; State; Zip Code 4700 E. Riverside Dr. #334 \$100.00 Austin, TX 78741 (b) Description (If travel outside of Texas, complete Schedule T) (a) Category (See Categories listed at the top of this schedule) 8 **PURPOSE** contract labor Salaries/Wages/Contract Labor OF 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 Pavee name 09/30/2014 Rountree, Chelsea Amount (\$) Payee address City; State; Zip Code 4810 Walden Circle \$1,500.00 Austin, TX 78723 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** Salary Salaries/Wages/Contract Labor 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 Rountree, Chelsea 10/16/2014 Amount (\$) Pavee address City; State; Zip Code 4810 Walden Circle \$1,500.00 Austin, TX 78723 Description (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) **PURPOSE** Salary Salaries/Wages/Contract Labor 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 Scherer, Laith 09/30/2014 Amount (\$) Payee address City; State; Zip Code 1112 West Ave. #215 \$90.00 San Marcos, TX 78666 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** contract labor Salaries/Wages/Contract Labor OF **EXPENDITURE**

Office held:

Check if Austin, TX, officeholder living expense

Office sought:

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/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out of District
Offlice Overhead/Rental Expense

Contr Ca OTHE

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

Fees	The Instruction Guide explains how	· · · · · · · · · · · · · · · · · · ·
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 9/12 R	Ciones Demail	00000011
4 Date	5 Payee name	
10/07/2014	Scherer, Laith	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$250.00	1112 West Ave. #215 San Marcos, TX 78666	
	Gair Marada, 17070000	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Salaries/Wages/Contract Labor	contract labor
EXPENDITURE		
S.O. J.L. OHLY Z	Condidate I Office holder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
9 Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		
Date	Payee name	
10/13/2014	Scherer, Laith	
Amount (\$)	Payee address City; State; Zip Code	
\$260.00	1112 West Ave. #215 San Marcos, TX 78666	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Salaries/Wages/Contract Labor	contract labor
EXPENDITURE		
Campleta ONLY if	Candidate / Officeholder name	Check If Austin, TX, officeholder living expense Office sought: Office held:
Complete ONLY if direct expenditure	Carioldate / Officeriolder frame	Office sought.
to benefit C/OH		
Date	Payee name	
10/20/2014	Scherer, Laith	
Amount (\$)	Payee address City; State; Zip Code 1112 West Ave. #215	•
\$225.00	San Marcos, TX 78666	
		·
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Salaries/Wages/Contract Labor	contract labor
EXPENDITURE		
Complete ONLY if	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
direct expenditure	Consider a contract that the	# 11 P 1 P 1 P 1 P 1 P 1 P 1 P 1 P 1 P 1
to benefit C/OH		
Date 00/20/2014	Payee name Staples	
09/29/2014 Amount (\$)	Payee address City; State; Zip Code	
\$127.33		
\$127.33	Austin, TX 78723	
BUBBOSE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) office supplies
PURPOSE OF	Office Overhead/Rental Expense	Onice supplies
EXPENDITURE	·	Check if Austin, TX, officeholder living expense
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure		-

SCHEDULE F

Advertising Expense - Accounting/Banking Consulting Expense Event Expense

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

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel lo District

Travel Out Of District Office Overhead/Rental Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

OTHER (enter a category not listed above) Printing Expense The Instruction Guide explains how to complete this form. 3 ACCOUNT # (TEC filers) 1 PAGE# Pierce, Darrell 00000011 Schedule: 10/12 Report: 27/30 4 Date 5 Payee name 10/14/2014 Staples 6 Amount (\$) Payee address City; State; Zip Code 1201 Barbara Jordan Blvd. \$145.10 Austin, TX 78723 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 **PURPOSE** office supplies Office Overhead/Rental Expense OF 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 10/21/2014 Staples Amount (\$) Payee address City; State; Zip Code 1201 Barbara Jordan Blvd. \$21.06 Austin, TX 78723 Description (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) **PURPOSE** office supplies Office Overhead/Rental Expense ΩF 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 Susan Harry Consulting, LLC 10/15/2014 Amount (\$) Payee address City: State: Zip Code P.O. Box 301074 \$730.00 Austin, TX 78703 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE Compliance consulting Consulting Expense ΩF 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 Pavee name 09/29/2014 Vega, Adolph Amount (\$) Payee address City: State: Zip Code 12443 Tech Ridge Blvd. #1113 \$60.00 Austin, TX 78753 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** contract labor Salaries/Wages/Contract Labor 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

POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Advertising Expense Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Transportation Equipment & Related Expense Accounting/Banking Contributions/Donations Made By Candidate/Officeholder/Political Committee Consulting Expense Event Expense Travel In District Travel Out Of District Office Overhead/Rental Expense Polling Expense OTHER (enter a category not listed above) Printing Expense The Instruction Guide explains how to complete this form. 2 FILER NAME 3 ACCOUNT # (TEC filers) 1 PAGE# Pierce, Darrell 00000011 Schedule: 11/12 Report: 28/30 4 Date 5 Payee name 10/07/2014 Vega, Adolph 6 Amount (\$) Payee address City; State;2 Zip Code 12443 Tech Ridge Blvd. #1113 \$60.00 Austin, TX 78753 (b) Description (If travel outside of Texas, complete Schedule T) (a) Category (See Categories listed at the top of this schedule) 8 PURPOSE Contract labor Salaries/Wages/Contract Labor 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 10/20/2014 Vega, Adolph Payee address City; State; Zip Code Amount (\$) 12443 Tech Ridge Blvd. #1113 Austin, TX 78753 \$60.00 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Contract labor Salaries/Wages/Contract Labor **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 Date Payee name Williams, Nick 10/07/2014 Amount (\$) Payee address City; State; Zip Code 7889 Highway 71 Austin, TX 78735 \$90.00 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description PURPOSE contract labor Salaries/Wages/Contract Labor 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 Williams, Nick 10/13/2014 Payee address City; State; Zip Code Amount (\$) 7889 Highway 71 Austin, TX 78735 \$15.00 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) contract labor **PURPOSE** Salaries/Wages/Contract Labor 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

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

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

Polling Expense

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

Travel Out Of District OTHER (enter a category not listed above) Office Overhead/Rental Expense Printing Expense The Instruction Guide explains how to complete this form. 2 FILER NAME 3 ACCOUNT # (TEC filers) 1 PAGE# Pierce, Darrell 00000011 Schedule: 12/12 Report: 29/30 4 Date 5 Payee name 10/20/2014 Williams, Nick 6 Amount (\$) Payee address City; State; Zip Code 7889 Highway 71 \$100.00 Austin, TX 78735 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 PURPOSE contract labor Salaries/Wages/Contract Labor OF 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 09/30/2014 Young, Bryan Amount (\$) Payee address City; State; Zip Code 1107 Greenlawn Blvd. Round Rock, TX 78664 \$225.00 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Graphic design Consulting Expense 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

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

Advertising Expense Accounting/Banking Consulting Expense Event Expense

Texas Ethics Commission

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

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
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# Pierce, Darrell 00000011 Schedule: 1/1 Report: 30/30 4 Date 5 Payee name 09/30/2014 Lowe's Amount (\$) Payee address City; State; Zip Code 6400 Brodie Lane \$4.42 Austin, TX 78745 Reimbursement from political contributions intended (a) Category (See Categories listed at the top of this schedule) (b) Description (if travel outside of Texas, complete Schedule T) **PURPOSE** Advertising Expense yard sign hardware OF EXPENDITURE Check if Austin, TX, officeholder living expense