


FORM COR-C/OH

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

1 ACCOUNT # 01111111		2 PAGE # 1 of 12	
3 CANDIDATE/ OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Ms. Erin NICKNAME LAST SUFFIX McGann	OFFICE USE ONLY Date Received Date Hand-delivered or Date Forwarded Receipt # Legal Date Processed Date Imaged	
4 ORIGINAL REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> Runoff <input type="checkbox"/> Other (specify) <input type="checkbox"/> July 15 <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> 30th day before election <input type="checkbox"/> 15th day after treasurer appointment (officeholder only) <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Final Report		
5 ORIGINAL PERIOD COVERED	Month Day Year Month Day Year 09/26/2014 THROUGH 10/25/2014		

6 EXPLANATION OF CORRECTION
 Added in-kind contribution from James Jones. We did not know at the time of filing Jones made expenditures for a fundraising event.

7 AFFIDAVIT <div style="border: 2px solid black; padding: 5px; width: fit-content; margin: 10px 0;">  </div>	<p>I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.</p> <p>Check ONLY if applicable:</p> <p><input type="checkbox"/> Semiannual reports: This report is an amendment/correction to a semi-annual report due on or after September 1, 2011. If amendment/correction is filed on or after the eighth day after the original report was filed, I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.</p> <p><input checked="" type="checkbox"/> Other reports (excluding semiannual reports): I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.</p>
AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me by <u>Erin McGann</u> to certify which, witness my hand and seal of office.	<div style="text-align: right;"> <u>Erin McGann</u> Signature of Candidate or Officeholder </div> <div style="text-align: right; margin-top: 10px;"> this the <u>29th</u> day of <u>October</u>, 20<u>14</u> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div> <u>[Signature]</u> Signature of officer administering oath </div> <div> <u>Jaira Jaimes</u> Printed name of officer administering oath </div> <div> <u>Sms. Sgt. Ben White ASW</u> Title of officer administering oath </div> </div>

**Remember To Attach Any Part Of The Campaign Finance Report Form
Needed To Report And Explain Corrections**

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers) 01111111	2 PAGE # 2 of 12
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Ms.	FIRST Erin	MI
	NICKNAME	LAST McGann	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2304 S 3rd Street Austin, TX 78704		
	<div style="border: 1px solid black; padding: 5px;"> OFFICE USE ONLY Date Received: 11/29/14 Date Hand-delivered on: 11/29/14 Date Postmarked: 11/29/14 Receipt #: 11/29/14 Date Processed: 11/29/14 Date Imaged: 11/29/14 </div>		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Meredith	MI
	NICKNAME	LAST Bryant	SUFFIX
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 13012 Stillforest St Austin, TX 78729		
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(512)	577-1528	
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
9 PERIOD COVERED	Month Day Year Month Day Year 09/26/2014 THROUGH 10/25/2014		
10 ELECTION	ELECTION DATE Month Day Year 11/04/2014		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special
	11 OFFICE OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) Austin City Council District 9

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM **C/OH**
COVER SHEET PG 2

13 C/OH NAME McGann, Erin (Ms.)

14 ACCOUNT # (Ethics Commission filers)
01111111

**15 NOTICE
FROM
POLITICAL
COMMITTEE(S)**

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

COMMITTEE TYPE

COMMITTEE NAME

☐ **GENERAL**

COMMITTEE ADDRESS

☐ **SPECIFIC**

COMMITTEE CAMPAIGN TREASURER NAME

☐ additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

**16 CONTRIBUTION
TOTALS**

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 0.00

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

\$ 1,230.00

**EXPENDITURE
TOTALS**

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

\$ 775.00

4. TOTAL POLITICAL EXPENDITURES

\$ 12,316.46

**CONTRIBUTION
BALANCE**

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

\$ 13,190.64

**OUTSTANDING
LOAN TOTALS**

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

\$ 15,000.00

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.

Erin McGann

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day
of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Print name of officer administering oath

Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 1/2 Report: 4/12

2 FILER NAME McGann, Erin (Ms.)

3 ACCOUNT # (Ethics Commission filers)

01111111

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Gore, Debra

10/08/2014

6 Contributor address; City; State; Zip Code
4825 Eagle Feather Dr
Austin, TX 78735

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
Teacher

10 Employer (See Instructions)
Regents School of Austin

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Hickman, Roger (Mr.)

09/26/2014

Contributor address; City; State; Zip Code
4004A Shoal Creek Blvd
Austin, TX 78756

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Jones, James

10/25/2014

Contributor address; City; State; Zip Code
3700 Thompson St.
Austin, TX 78702

Amount of
contribution (\$)

\$155.00

In-kind contribution
description (if applicable)
Fundraising services
(venue & beverages)

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

Principal occupation / Job title (See Instructions)
Entrepreneur

Employer (See Instructions)
LVS

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Kozinsky, Stanley

09/29/2014

Contributor address; City; State; Zip Code
4604 Ave G
Austin, TX 78751

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Matherne, Damien

10/02/2014

Contributor address; City; State; Zip Code
11727 Sterling Panorama
Austin, TX 78738

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
CFO

Employer (See Instructions)
Cleanscapes

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 2/2 Report: 5/12

2 FILER NAME McGann, Erin (Ms.)

3 ACCOUNT # (Ethics Commission filers)

01111111

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Smith, Jare

7 Amount of
contribution (\$)

8 In-kind contribution
description (if applicable)

09/29/2014

6 Contributor address; City; State; Zip Code

4316 Scales St
Austin, TX 78723

\$100.00

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)

Smith, Jim

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

10/18/2014

Contributor address; City; State; Zip Code

4316 Scales St
Austin, TX 78723

\$150.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)

Smith-Gray, Sandra

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

10/12/2014

Contributor address; City; State; Zip Code

911 E 43rd St
Austin, TX 78751

\$50.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

LOANS**SCHEDULE E**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/1 Report: 6/12	
2 FILER NAME McGann, Erin (Ms.)		3 ACCOUNT # (Ethics Commission filers) 01111111	
4 TOTAL OF UNITEMIZED LOANS: ⇔⇔⇔⇔⇔⇔			\$
5 Date of loan 10/04/2014	7 Name of lender McGann, Erin <input type="checkbox"/> out-of-state PAC (ID# _____)		9 Loan Amount (\$) \$10,000.00
6 Is lender a financial Institution? No	8 Lender address; City; State; Zip Code 2304 S 3rd Street Austin, TX 78704		10 Interest rate 0
			11 Maturity date 12/31/2014
12 Principal occupation / Job title (See Instructions) Program Manager		13 Employer (See Instructions) Texas Department of Criminal Justice	
14 Description of Collateral <input checked="" type="checkbox"/> none		15 Check if personal funds were deposited into political account <input checked="" type="checkbox"/>	
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor 18 Guarantor address; City; State; Zip Code		19 Amount Guaranteed (\$)
20 Principal Occupation		21 Employer	

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/5 Report: 7/12		2 FILER NAME McGann, Erin (Ms.)		3 ACCOUNT # (TEC filers) 01111111	
4 Date 10/07/2014	5 Payee name Anton, Austin				
6 Amount (\$) \$100.00	7 Payee address City: State: Zip Code 4600 Elmont Dr Apt 833 Austin, TX 78741				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Block walking services		
	<input type="checkbox"/> 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 10/11/2014	Payee name Bryant, Dylan				
Amount (\$) \$50.00	Payee address City: State: Zip Code 1401 St. Edwards Dr Austin, TX 78704				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Block walking services		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 10/18/2014	Payee name Bryant, Dylan				
Amount (\$) \$50.00	Payee address City: State: Zip Code 1401 St. Edwards Dr. Austin, TX 78704				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Block walking services		
	<input type="checkbox"/> 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 Conviction Digital				
Amount (\$) \$125.00	Payee address City: State: Zip Code 919 Congress Ave Austin, TX 78701				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign postcard graphics design		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 2/5 Report: 8/12		2 FILER NAME McGann, Erin (Ms.)		3 ACCOUNT # (TEC filers) 01111111
4 Date 10/11/2014	5 Payee name Jacobs, James			
6 Amount (\$) \$50.00	7 Payee address City; State; Zip Code 1901 E. Ben White Blvd Austin, TX 78741			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Block walking services <input type="checkbox"/> 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 10/18/2014	Payee name Jacobs, James			
Amount (\$) \$50.00	Payee address City; State; Zip Code 1901 E. Ben White Blvd Austin, TX 78741			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Block walking services <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:			
Date 10/22/2014	Payee name KUT			
Amount (\$) \$500.00	Payee address City; State; Zip Code 300 W. Dean Keeton Austin, TX 78712			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Radio advertising <input type="checkbox"/> 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	Payee name Long, Zach			
Amount (\$) \$60.00	Payee address City; State; Zip Code 305 E 21st St Austin, TX 78705			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Block walking services <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:			

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 3/5 Report: 9/12		2 FILER NAME McGann, Erin (Ms.)		3 ACCOUNT # (TEC filers) 01111111	
4 Date 09/30/2014	5 Payee name LVS - Local Voice Solutions				
6 Amount (\$) \$650.00	7 Payee address City; State; Zip Code 3700 Thompson Street Austin, TX 78702				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign coordination and research		
	<input type="checkbox"/> 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 10/08/2014	Payee name Mallette, Cindy				
Amount (\$) \$75.00	Payee address City; State; Zip Code 8403-A Fathom Circle Austin, TX 78750				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> PR services and media relations		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:				
Date 10/17/2014	Payee name Mallette, Cindy				
Amount (\$) \$150.00	Payee address City; State; Zip Code 8403-A Fathom Circle Austin, TX 78750				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> PR services and media relations		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:				
Date 10/07/2014	Payee name Office Depot				
Amount (\$) \$333.19	Payee address City; State; Zip Code 2101 S Lamar Austin, TX 78704				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing campaign flyers and glossy cards		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:				

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 4/5 Report: 10/12		2 FILER NAME McGann, Erin (Ms.)		3 ACCOUNT # (TEC filers) 01111111	
4 Date 10/25/2014	5 Payee name Paypal				
6 Amount (\$) \$31.53	7 Payee address City; State; Zip Code 2211 North First St. San Jose, CA 95131				
8 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) <input type="checkbox"/> Paypal user fees <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:				
Date 10/21/2014	Payee name QuikPrint				
Amount (\$) \$7,717.08	Payee address City; State; Zip Code 410 Congress Ave Austin, TX 78701				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Print and mail campaign letters <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:				
Date 10/11/2014	Payee name Samilpa, Marcus				
Amount (\$) \$50.00	Payee address City; State; Zip Code 243 Artesian Dr Cedar Creek, TX 78612				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Block walking services <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:				
Date 10/18/2014	Payee name Samilpa, Marcus				
Amount (\$) \$50.00	Payee address City; State; Zip Code 243 Artesian Dr Cedar Creek, TX 78612				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Block walking services <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:				

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 5/5 Report: 11/12		2 FILER NAME McGann, Erin (Ms.)		3 ACCOUNT # (TEC filers) 01111111
4 Date 10/11/2014	5 Payee name Tasker, Martin			
6 Amount (\$) \$50.00	7 Payee address City; State; Zip Code 1901 E. Ben White Blvd Austin, TX 78741			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Block walking services <input type="checkbox"/> 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 10/18/2014	Payee name Tasker, Martin			
Amount (\$) \$50.00	Payee address City; State; Zip Code 1901 E. Ben White Blvd Austin, TX 78741			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Block walking services <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 10/07/2014	Payee name Vistaprint			
Amount (\$) \$461.90	Payee address City; State; Zip Code 95 Hayden Avenue Lexington, MA 02421			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing postcard mailers <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/1 Report: 12/12		2 FILER NAME McGann, Erin (Ms.)		3 ACCOUNT # (TEC filers) 01111111	
4 Date 10/01/2014		5 Payee name HubRunner			
6 Amount (\$) \$110.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address City; State; Zip Code 4031 Guadalupe St Austin, TX 78751			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Web hosting for campaign website <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Date 10/06/2014		Payee name LVS - Local Voice Solutions			
Amount (\$) \$710.31 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code 3700 Thompson Street Austin, TX 78702			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postcard Printing <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Date 10/01/2014		Payee name Office Depot			
Amount (\$) \$75.50 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code 2101 S Lamar Austin, TX 78704			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing flyers for campaign events <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Date 10/12/2014		Payee name Office Depot			
Amount (\$) \$41.95 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code 2101 S Lamar Austin, TX 78704			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Flyers for campaign events <input type="checkbox"/> Check if Austin, TX, officeholder living expense	