

FORM COR-C/OH

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

1 ACCOUNT #		2 Total pages filed: 51		OFFICE USE ONLY	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	Date Received	
	NICKNAME	LAST Dealey	SUFFIX	Date Hand-delivered or Postmarked	
4 ORIGINAL REPORT TYPE	<input type="checkbox"/> January 15.	<input type="checkbox"/> Runoff.	<input type="checkbox"/> Other. (specify) _____		
	<input checked="" 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 type="checkbox"/> 8th day before election	<input type="checkbox"/> Final report			
5 ORIGINAL PERIOD COVERED	Month	Day	Year	Month	Day
	02	27	14	THROUGH	06
				Receipt #	Amount
				Date Processed	
				Date Imaged	

6 EXPLANATION OF CORRECTION

A contribution received from Santiago Coronado was mistakenly reported in his wife's name.

7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check **ONLY** if applicable:

☒ **Semiannual reports:** This report is an amendment/correction to a semiannual 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.

☐ **Other reports** (excluding semiannual reports due on or after September 1, 2011): 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.



AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Amanda Dealey, this the 14th day of November

20 14, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

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

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

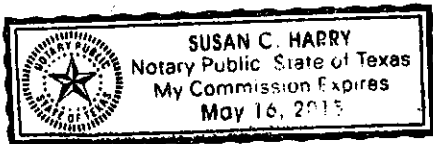
FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers) 00000008	2 PAGE # 1 of 50
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Amanda		OFFICE USE ONLY Date Received 2014 NOV 24 PM 2 19 AUSTIN CITY CLERK RECEIVED Date Hand-delivered or Date Re-marked Receipt # Amount Date Processed Date Imaged
	NICKNAME LAST SUFFIX Mandy Dealey		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 300423 Austin, TX 78703		
<input checked="" type="checkbox"/> Change of Address			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Gary		
	NICKNAME LAST SUFFIX Valdez		
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 685008 Austin, TX 78768		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 537-5473		
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 checked="" type="checkbox"/> July 15 <input 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 02/27/2014 THROUGH 06/30/2014		
10 ELECTION	ELECTION DATE Month Day Year 11/04/2014	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any)	12 OFFICE SOUGHT (if known) Austin City Council District 10	

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS****FORM C/OH
COVER SHEET PG 2****13 C/OH NAME** Dealey, Amanda**14 ACCOUNT #** (Ethics Commission filers)
00000008**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****COMMITTEE CAMPAIGN TREASURER ADDRESS**☐ additional pages**16 CONTRIBUTION
TOTALS**1. **TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED** \$ 1,165.002. **TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS).** \$ 50,295.31**EXPENDITURE
TOTALS**3. **TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED** \$ 28.004. **TOTAL POLITICAL EXPENDITURES** \$ 28,573.59**CONTRIBUTION
BALANCE**5. **TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD** \$ 35,462.69**OUTSTANDING
LOAN TOTALS**6. **TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD** \$ 100.00**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.

Amanda Dealey
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Amanda Dealey, this the 14th day of July, 2014, 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: 1/40 Report: 3/50

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

06/29/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Aaker, Linda6 Contributor address; City; State; Zip Code
6204 Shadow Mountain Cv
Austin, TX 78731-41107 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)
retired10 Employer (See Instructions)
none

Date

05/08/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Aaronson, PaulaContributor address; City; State; Zip Code
3710 Meadowbank Dr
Austin, TX 78703-1026Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
Retired EngineerEmployer (See Instructions)
N/A

Date

06/20/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Agnew, GinnyContributor address; City; State; Zip Code
1204 Castle Hill St
Austin, TX 78703-4126Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
community volunteerEmployer (See Instructions)
none

Date

06/01/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Albright, AlexandraContributor address; City; State; Zip Code
2703 Macken St
Austin, TX 78703-1021Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
Law FacultyEmployer (See Instructions)
UT Austin

Date

06/30/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Alexander, ClydeContributor address; City; State; Zip Code
828 Ivy Ln
San Antonio, TX 78209-2831Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
Consultant/LobbyistEmployer (See Instructions)
Alexander Consulting Group LLC (Self Employed)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 2/40 Report: 4/50

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

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

Alonzo, Sinead

7 Amount of
contribution (\$)8 In-kind contribution
description (if applicable)

05/08/2014

6 Contributor address; City; State; Zip Code

4513 Shoalwood Ave
Austin, TX 78756-2916

\$350.00

(If travel outside of Texas, complete Schedule T) ☐9 Principal occupation / Job title (See Instructions)
Attorney10 Employer (See Instructions)
Reeves Brightwell LLP

Date

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

Alsup, Marion

Amount of
contribution (\$)In-kind contribution
description (if applicable)

06/21/2014

Contributor address; City; State; Zip Code

2311 Pruett St
Austin, TX 78703-4337

\$200.00

(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
VP of EducationEmployer (See Instructions)
Zilker Botanical Gardens

Date

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

Anderson, James

Amount of
contribution (\$)In-kind contribution
description (if applicable)

05/19/2014

Contributor address; City; State; Zip Code

1213 W 12th St
Austin, TX 78703-4136

\$350.00

(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
OwnerEmployer (See Instructions)
Anderson's Coffee Co.

Date

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

Anderson, Tyler

Amount of
contribution (\$)In-kind contribution
description (if applicable)

06/30/2014

Contributor address; City; State; Zip Code

4804 Balcones Dr
Austin, TX 78731-5309

\$100.00

(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# _____)

Armstrong, Valerie

Amount of
contribution (\$)In-kind contribution
description (if applicable)

06/30/2014

Contributor address; City; State; Zip Code

212 Lavaca St
Ste 300
Austin, TX 78701-3955

\$350.00

(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
homemakerEmployer (See Instructions)
none

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 3/40 Report: 5/50

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

06/30/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Armstrong, William III

6 Contributor address; City; State; Zip Code
212 Lavaca St
Ste 300
Austin, TX 78701-3955

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)
Chairman

10 Employer (See Instructions)
Stratus Properties

Date

05/21/2014

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

Contributor address; City; State; Zip Code
1311 W 10th St
Austin, TX 78703-4815

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/08/2014

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

Contributor address; City; State; Zip Code
3707 Laurel Ledge Ln
Austin, TX 78731-4049

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
Retired

Date

06/30/2014

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

Contributor address; City; State; Zip Code
3707 Laurel Ledge Ln
Austin, TX 78731-4049

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
Retired

Date

06/29/2014

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

Contributor address; City; State; Zip Code
3707 Laurel Ledge Ln
Austin, TX 78731-4049

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)
Attorney

Employer (See Instructions)
Ausley, Algert, Robertson & Flores

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 4/40 Report: 6/50

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

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

Ausley-Flores, Kelly

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

06/27/2014

6 Contributor address; City; State; Zip Code

12353 Ballerstedt Rd
Elgin, TX 78621-4126

\$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# _____)

Ayad, Victor

Amount of contribution (\$)

In-kind contribution description (if applicable)

06/24/2014

Contributor address; City; State; Zip Code

1111 W 11th St
The Castle
Austin, TX 78703-4915

\$350.00

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

Principal occupation / Job title (See Instructions)
Investment Manager

Employer (See Instructions)
Castle Hill Partners

Date

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

Ayres, Robert

Amount of contribution (\$)

In-kind contribution description (if applicable)

06/10/2014

Contributor address; City; State; Zip Code

2408 Keating Ln
Austin, TX 78703-2342

\$350.00

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

Principal occupation / Job title (See Instructions)
Land Steward

Employer (See Instructions)
Shield Ranch

Date

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

Bailey, Donna

Amount of contribution (\$)

In-kind contribution description (if applicable)

06/21/2014

Contributor address; City; State; Zip Code

2003 Forest Trl
Austin, TX 78703-2929

\$350.00

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

Principal occupation / Job title (See Instructions)
retired

Employer (See Instructions)
none

Date

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

Balaka, Gerald

Amount of contribution (\$)

In-kind contribution description (if applicable)

06/22/2014

Contributor address; City; State; Zip Code

1800 W 34th St
Austin, TX 78703-1317

\$100.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 5/40 Report: 7/50

2 FILER NAME Dealey, Amanda**3** ACCOUNT # (Ethics Commission filers)

00000008

4 Date

06/30/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Balaka, Gerald**6** Contributor address; City; State; Zip Code
1800 W 34th St
Austin, TX 78703-1317**7** Amount of contribution (\$)

\$100.00

8 In-kind contribution description (if applicable)(If travel outside of Texas, complete Schedule T) ☐**9** Principal occupation / Job title (See Instructions)**10** Employer (See Instructions)

Date

05/12/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ball, CharlotteContributor address; City; State; Zip Code
137 Ausable Rd
Keene Valley, NY 12943-1718

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/22/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Basciano, JoyceContributor address; City; State; Zip Code
1907 W 34th St
Austin, TX 78703-1318

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)
homemakerEmployer (See Instructions)
none

Date

06/30/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Basciano, JoyceContributor address; City; State; Zip Code
1907 W 34th St
Austin, TX 78703-1318

Amount of contribution (\$)

\$150.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
homemakerEmployer (See Instructions)
none

Date

05/11/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Berkel, SuzanneContributor address; City; State; Zip Code
4405 Sinclair Ave
Austin, TX 78756-3220

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 6/40 Report: 8/50

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

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

Beuerlein, Laura

7 Amount of
contribution (\$)8 In-kind contribution
description (if applicable)

06/23/2014

6 Contributor address; City; State; Zip Code

2605 Woodmont Ave
Austin, TX 78703-3260

\$350.00

(If travel outside of Texas, complete Schedule T) ☐9 Principal occupation / Job title (See Instructions)
Executive VP10 Employer (See Instructions)
Heritage Title Company of Austin, Inc.

Date

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

Blodgett, Terrell

Amount of
contribution (\$)In-kind contribution
description (if applicable)

06/10/2014

Contributor address; City; State; Zip Code

4100 Jackson Ave
Apt 250
Austin, TX 78731-6052

\$100.00

(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# _____)

Bohart, Jim

Amount of
contribution (\$)In-kind contribution
description (if applicable)

06/24/2014

Contributor address; City; State; Zip Code

5513 Cuesta Verde
Austin, TX 78746-1533

\$100.00

(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# _____)

Boone, Cecilia

Amount of
contribution (\$)In-kind contribution
description (if applicable)

06/15/2014

Contributor address; City; State; Zip Code

3111 Welborn St
Apt 1404
Dallas, TX 75219-5016

\$350.00

(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
retiredEmployer (See Instructions)
retired

Date

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

Boone Cunningham, Aimee

Amount of
contribution (\$)In-kind contribution
description (if applicable)

05/08/2014

Contributor address; City; State; Zip Code

2522 Pearce Rd
Austin, TX 78730-4255

\$350.00

(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
Community VolunteerEmployer (See Instructions)
None

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 7/40 Report: 9/50

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)
00000008

4 Date 05/11/2014 5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Borders, Tom

7 Amount of contribution (\$) 8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
610 Guadalupe St
Austin, TX 78701-2926

\$350.00

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

9 Principal occupation / Job title (See Instructions)
Investment Management

10 Employer (See Instructions)
Midtown Group

Date 05/22/2014 Full name of contributor ☐ out-of-state PAC (ID# _____)
Box, Eden

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
1501 W 6th St
F2
Austin, TX 78703-5160

\$100.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 05/08/2014 Full name of contributor ☐ out-of-state PAC (ID# _____)
Brightwell, Kim

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
101 Yaupon Dr
Spicewood, TX 78669-4191

\$350.00

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

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Reeves & Brightwell

Date 06/16/2014 Full name of contributor ☐ out-of-state PAC (ID# _____)
Bullock, Dan

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
PO Box 5627
Austin, TX 78763-5627

\$100.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 06/15/2014 Full name of contributor ☐ out-of-state PAC (ID# _____)
Burke, Robert

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
12605 Schreiner Ct
Austin, TX 78732-2244

\$350.00

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

Principal occupation / Job title (See Instructions)
Engineer

Employer (See Instructions)
Page Southerland Page, Inc

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 8/40 Report: 10/50

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)
00000008

4 Date
06/30/2014

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

6 Contributor address; City; State; Zip Code
906 Vogel Dr
Lockhart, TX 78644-3344

7 Amount of contribution (\$) | **8** In-kind contribution description (if applicable)

\$100.00

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date
06/30/2014

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

Contributor address; City; State; Zip Code
4107 Sinclair Ave
Austin, TX 78756-3524

Amount of contribution (\$) | In-kind contribution description (if applicable)

\$100.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
06/14/2014

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

Contributor address; City; State; Zip Code
98 San Jacinto Blvd
Ste 2000
Austin, TX 78701-4288

Amount of contribution (\$) | In-kind contribution description (if applicable)

\$150.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
06/26/2014

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

Contributor address; City; State; Zip Code
1805 Cresthaven Dr
Austin, TX 78704-2752

Amount of contribution (\$) | In-kind contribution description (if applicable)

\$100.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
05/12/2014

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

Contributor address; City; State; Zip Code
7109 Ridge Oak Rd
Austin, TX 78749-1956

Amount of contribution (\$) | In-kind contribution description (if applicable)

\$350.00

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

Principal occupation / Job title (See Instructions)
retired

Employer (See Instructions)
none

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 9/40 Report: 11/50

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)
00000008

4 Date
05/10/2014

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

7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
PO Box 444
Martindale, TX 78655-0444

\$350.00

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

9 Principal occupation / Job title (See Instructions)
Board Member

10 Employer (See Instructions)
Texas Democracy Foundation

Date
06/23/2014

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

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
1100 Guadalupe St
Austin, TX 78701-2116

\$350.00

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

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Minton, Burton, Bassett & Collins, P.C.

Date
06/30/2014

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

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
5005 Westview Dr
Austin, TX 78731-4737

\$100.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
05/30/2014

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

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
200 The Cir
Austin, TX 78704-2418

\$250.00

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

Principal occupation / Job title (See Instructions)
Computer consultant

Employer (See Instructions)
Self-employed

Date
06/24/2014

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

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
1115 Wild Basin Ledge
Austin, TX 78746

\$350.00

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

Principal occupation / Job title (See Instructions)
CEO

Employer (See Instructions)
PeoplePattern

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 10/40 Report: 12/50

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)
00000008

4 Date
06/24/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Cho, Laura Scanlan

6 Contributor address; City; State; Zip Code
1115 Wild Basin Ledge
Austin, TX 78746

7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable)

\$350.00

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

9 Principal occupation / Job title (See Instructions)
Homemaker & Community Volunteer

10 Employer (See Instructions)
none

Date
06/24/2014

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

Contributor address; City; State; Zip Code
2418 Harris Blvd
Austin, TX 78703-2406

Amount of contribution (\$) | In-kind contribution description (if applicable)

\$350.00

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

Principal occupation / Job title (See Instructions)
oil and gas production

Employer (See Instructions)
self

Date
06/29/2014

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

Contributor address; City; State; Zip Code
2900 Wade Ave
Austin, TX 78703-1017

Amount of contribution (\$) | In-kind contribution description (if applicable)

\$100.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
06/10/2014

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

Contributor address; City; State; Zip Code
3211 Cherry Ln
Austin, TX 78703-2751

Amount of contribution (\$) | In-kind contribution description (if applicable)

\$350.00

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

Principal occupation / Job title (See Instructions)
Assistant Instructor

Employer (See Instructions)
Capella University

Date
06/30/2014

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

Contributor address; City; State; Zip Code
5602 Palisade Ct
Austin, TX 78731-4508

Amount of contribution (\$) | In-kind contribution description (if applicable)

\$125.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 11/40 Report: 13/50

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

05/10/2014

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

Craig, Richard

6 Contributor address; City; State; Zip Code

1419 Preston Ave
Austin, TX 78703-1901

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)
Attorney

10 Employer (See Instructions)
self

Date

05/22/2014

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

Croom, John

Contributor address; City; State; Zip Code

5003 Crestway Dr
Austin, TX 78731-5403

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/30/2014

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

Cunningham, Ed

Contributor address; City; State; Zip Code

2522 Pearce Rd
Austin, TX 78730-4255

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)
CEO

Employer (See Instructions)
United States Natural Resource Group

Date

06/22/2014

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

Curry, Lisa

Contributor address; City; State; Zip Code

700 Lavaca St
Ste 1400
Austin, TX 78701-3102

Amount of
contribution (\$)

\$90.31

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/10/2014

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

Curry, Michael

Contributor address; City; State; Zip Code

700 Lavaca St
Ste 1400
Austin, TX 78701-3102

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 12/40 Report: 14/50

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

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

Curry, Michael

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

06/23/2014

6 Contributor address; City; State; Zip Code

700 Lavaca St
Ste 1400
Austin, TX 78701-3102

\$200.00

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

9 Principal occupation / Job title (See Instructions)
Attorney

10 Employer (See Instructions)
self

Date

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

Danze, Elizabeth

Amount of contribution (\$)

In-kind contribution description (if applicable)

06/30/2014

Contributor address; City; State; Zip Code

4701 Spicewood Springs Rd
Austin, TX 78759-8402

\$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# _____)

Dealey, Christopher

Amount of contribution (\$)

In-kind contribution description (if applicable)

06/09/2014

Contributor address; City; State; Zip Code

5401 Ridge Oak Dr
Austin, TX 78731-4815

\$350.00

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

Principal occupation / Job title (See Instructions)
Rancher

Employer (See Instructions)
Mayhew Ranch

Date

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

Dennis, Charles

Amount of contribution (\$)

In-kind contribution description (if applicable)

05/22/2014

Contributor address; City; State; Zip Code

4702 Shadow Ln
Austin, TX 78731-5335

\$350.00

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

Principal occupation / Job title (See Instructions)
Student

Employer (See Instructions)
Self-employed

Date

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

DePalma, Richard

Amount of contribution (\$)

In-kind contribution description (if applicable)

06/29/2014

Contributor address; City; State; Zip Code

7821 Wisteria Valley Dr
None
Austin, TX 78739-1993

\$100.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 13/40 Report: 15/50	
2 FILER NAME Dealey, Amanda		3 ACCOUNT # (Ethics Commission filers) 00000008	
4 Date 06/21/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dick, James 6 Contributor address; City; State; Zip Code PO Box 89 Round Top, TX 78954-0089	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Pianist		10 Employer (See Instructions) Round Top Festival Institute	
Date 05/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dobbs, Deborah Contributor address; City; State; Zip Code 5810 Westslope Dr Austin, TX 78731-3633	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None	
Date 05/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Drummer, Dorothy Contributor address; City; State; Zip Code 100 Congress Ave Ste 2000 Austin, TX 78701-2745	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dunning, Sarah Contributor address; City; State; Zip Code 9239 Hathaway St Dallas, TX 75220-2227	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) interior designer		Employer (See Instructions) self employed - The Design Studio	
Date 06/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dunning, Tom Contributor address; City; State; Zip Code 9239 Hathaway St Dallas, TX 75220-2227	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Lockton Dunning	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 14/40 Report: 16/50

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)
00000008

4 Date 05/14/2014
5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Dyal, Herman

7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
3403 Ledgestone Dr
Austin, TX 78731-5124

\$250.00

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

9 Principal occupation / Job title (See Instructions)
Designer

10 Employer (See Instructions)
Herman Dyal and Partners LLC

Date 06/30/2014
Full name of contributor ☐ out-of-state PAC (ID# _____)
Earley, Michelle

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
7308 Valburn Dr
Austin, TX 78731-1146

\$100.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 06/04/2014
Full name of contributor ☐ out-of-state PAC (ID# _____)
Fikes, Amy

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
3901 Euclid Ave
Dallas, TX 75205-3103

\$350.00

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

Principal occupation / Job title (See Instructions)
homemaker

Employer (See Instructions)
n/a

Date 06/04/2014
Full name of contributor ☐ out-of-state PAC (ID# _____)
Fikes, Lee

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
500 N Akard St
Ste 1900
Dallas, TX 75201-6629

\$350.00

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

Principal occupation / Job title (See Instructions)
Investments

Employer (See Instructions)
Bonanza Oil Co.

Date 05/10/2014
Full name of contributor ☐ out-of-state PAC (ID# _____)
Flagg Maxson, Peter

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
4212 Avenue F
Austin, TX 78751-3721

\$100.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 15/40 Report: 17/50

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Flores, Maria Luisa

7 Amount of
contribution (\$)

8 In-kind contribution
description (if applicable)

06/25/2014

6 Contributor address; City; State; Zip Code
1300 Alta Vista Ave
Austin, TX 78704-2515

\$250.00

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

9 Principal occupation / Job title (See Instructions)
Attorney

10 Employer (See Instructions)
Hendler Lyons Flores LLP

Date

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

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

06/17/2014

Contributor address; City; State; Zip Code
1757 Sunset Blvd
Houston, TX 77005-1713

\$350.00

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

Principal occupation / Job title (See Instructions)
attorney

Employer (See Instructions)
Jan Woodward Fox, PLC

Date

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

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

05/13/2014

Contributor address; City; State; Zip Code
3403 LedgeStone Dr
Austin, TX 78731-5124

\$250.00

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

Principal occupation / Job title (See Instructions)
Business Owner/ Design Firm

Employer (See Instructions)
Dyal and Partners

Date

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

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

06/30/2014

Contributor address; City; State; Zip Code
4314 Sinclair Ave
Austin, TX 78756-3219

\$100.00

(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# _____)
Gammon, Regan

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

06/06/2014

Contributor address; City; State; Zip Code
3125 Hemphill Park
Austin, TX 78705-2822

\$350.00

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

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Gammon Law Office

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 16/40 Report: 18/50

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

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

Gammon, William III

7 Amount of
contribution (\$)8 In-kind contribution
description (if applicable)

06/06/2014

6 Contributor address; City; State; Zip Code

3125 Hemphill Park
Austin, TX 78705-2822

\$350.00

(If travel outside of Texas, complete Schedule T) ☐9 Principal occupation / Job title (See Instructions)
Independent Insurance Agent10 Employer (See Instructions)
William Gammon Insurance

Date

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

Garza, Julian

Amount of
contribution (\$)In-kind contribution
description (if applicable)

05/12/2014

Contributor address; City; State; Zip Code

407 E 45th St
Apt 102
Austin, TX 78751-3801

\$50.00

(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# _____)

Garza, Julian

Amount of
contribution (\$)In-kind contribution
description (if applicable)

06/22/2014

Contributor address; City; State; Zip Code

407 E 45th St
Apt 102
Austin, TX 78751-3801

\$50.00

(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# _____)

Geddie, John

Amount of
contribution (\$)In-kind contribution
description (if applicable)

05/10/2014

Contributor address; City; State; Zip Code

1 Tournament Cv
The Hills, TX 78738-1121

\$350.00

(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
AttorneyEmployer (See Instructions)
self

Date

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

Geistman, Jan

Amount of
contribution (\$)In-kind contribution
description (if applicable)

06/16/2014

Contributor address; City; State; Zip Code

3105 Brightwood Dr
Austin, TX 78746-6707

\$200.00

(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
Financial professionalEmployer (See Instructions)
LBJ Family Wealth Advisors

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 17/40 Report: 19/50

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

06/18/2014

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

George, Cheryl

6 Contributor address; City; State; Zip Code

2501 Stratford Dr

Austin, TX 78746-5755

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)
retired

10 Employer (See instructions)
retired

Date

06/18/2014

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

George, Jr., R. James

Contributor address; City; State; Zip Code

2501 Stratford Dr

Austin, TX 78746-5755

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)
attorney

Employer (See instructions)
George, Brothers, Kincaid and Horton

Date

06/25/2014

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

Geyer, Ginger

Contributor address; City; State; Zip Code

3415 Cascadera Dr

Austin, TX 78731-5811

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See instructions)

Employer (See instructions)

Date

05/22/2014

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

Gilliland, Jr., Lukin T.

Contributor address; City; State; Zip Code

901 NE Loop 410

Ste 909

San Antonio, TX 78209-1310

Amount of contribution (\$)

\$250.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See instructions)
Investments

Employer (See instructions)
Self

Date

06/03/2014

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

Golden, Edwin

Contributor address; City; State; Zip Code

7303 Shoal Creek Blvd

Austin, TX 78757-2028

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See instructions)

Employer (See instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The **INSTRUCTION GUIDE** explains how to complete this form.

1 PAGE #

Schedule: 18/40 Report: 20/50

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

06/30/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Golden, Mary Ann

6 Contributor address; City; State; Zip Code
4501 River Wood Ct
Austin, TX 78731-4518

7 Amount of contribution (\$)

\$100.00

8 In-kind contribution description (if applicable)

(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# _____)
Grigg, Dicky

06/30/2014

Contributor address; City; State; Zip Code
35 Pascal Ln
Austin, TX 78746-3205

Amount of contribution (\$)

\$100.00

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# _____)
Grissom, Joene

05/10/2014

Contributor address; City; State; Zip Code
6603 Shadow Valley Dr
Austin, TX 78731-4145

Amount of contribution (\$)

\$100.00

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# _____)
Guerrero, Linda

06/16/2014

Contributor address; City; State; Zip Code
3204 Fairfax Walk
Austin, TX 78705-2512

Amount of contribution (\$)

\$65.00

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# _____)
Gullahorn, Jack

06/28/2014

Contributor address; City; State; Zip Code
PO Box 140045
Austin, TX 78714-0045

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)
Attorney

Employer (See instructions)
Jack W Gullahorn PC

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 19/40 Report: 21/50

2 FILER NAME Dealey, Amanda**3** ACCOUNT # (Ethics Commission filers)

00000008

4 Date

06/26/2014**5** Full name of contributor ☐ out-of-state PAC (ID# _____)
Hailey, Ann**6** Contributor address; City; State; Zip Code
3408 Mount Bonnell Rd
Austin, TX 78731-5850**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)
Librarian**10** Employer (See Instructions)
Pflugerville ISD

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Hailey, Jay Jr.

06/26/2014

Contributor address; City; State; Zip Code
3408 Mount Bonnell Rd
Austin, TX 78731-5850Amount of
contribution (\$)

\$350.00In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
AttorneyEmployer (See Instructions)
DLA Piper

Date

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

06/29/2014

Contributor address; City; State; Zip Code
900 Congress Ave
Fl 5
Austin, TX 78701-2437Amount of
contribution (\$)

\$350.00In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
Senior VPEmployer (See Instructions)
Texas Lawyers Insurance Exchange

Date

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

06/30/2014

Contributor address; City; State; Zip Code
1901 W 35th St
Austin, TX 78703-1358Amount of
contribution (\$)

\$100.00In-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# _____)
Harris, Lisa

05/10/2014

Contributor address; City; State; Zip Code
4522 Avenue F
Austin, TX 78751-3109Amount of
contribution (\$)

\$250.00In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
Title ExaminerEmployer (See Instructions)
Gracy Title

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 20/40 Report: 22/50

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)
00000008

4 Date

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

05/08/2014

6 Contributor address; City; State; Zip Code
327 Congress Ave
Ste 200
Austin, TX 78701-3656

7 Amount of contribution (\$) | **8** In-kind contribution description (if applicable)

\$350.00

(If travel outside of Texas, complete Schedule T) ☐
9 Principal occupation / Job title (See Instructions)
Chairman

10 Employer (See Instructions)
Star Tribune

Date

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

05/23/2014

Contributor address; City; State; Zip Code
5403 Musket Rdg
Austin, TX 78759-6223

Amount of contribution (\$) | In-kind contribution description (if applicable)

\$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# _____)
Head, Bill

05/12/2014

Contributor address; City; State; Zip Code
1104 Enfield Rd
Austin, TX 78703-4128

Amount of contribution (\$) | In-kind contribution description (if applicable)

\$350.00

(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
RetiredEmployer (See Instructions)
none

Date

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

05/10/2014

Contributor address; City; State; Zip Code
908 Terrace Mountain Dr
West Lake Hills, TX 78746-2732

Amount of contribution (\$) | In-kind contribution description (if applicable)

\$100.00

(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# _____)
Herring, Chuck

06/20/2014

Contributor address; City; State; Zip Code
1204 Castle Hill St
Austin, TX 78703-4126

Amount of contribution (\$) | In-kind contribution description (if applicable)

\$250.00

(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
attorneyEmployer (See Instructions)
Herring & Irwin

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 21/40 Report: 23/50	
2 FILER NAME Dealey, Amanda		3 ACCOUNT # (Ethics Commission filers) 00000008	
4 Date 05/30/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Herzele, Charlotte 6 Contributor address; City; State; Zip Code 3916 Avenue H Austin, TX 78751-4721	7 Amount of contribution (\$) \$20.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Lecturer		10 Employer (See Instructions) UT Austin	
Date 05/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Herzele, Charlotte Contributor address; City; State; Zip Code 3916 Avenue H Austin, TX 78751-4721	Amount of contribution (\$) \$330.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Lecturer		Employer (See Instructions) UT-Austin	
Date 06/14/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hilbert, Anne Contributor address; City; State; Zip Code 414 Sunfish St Lakeway, TX 78734-4404	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None	
Date 06/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hilgers, David Contributor address; City; State; Zip Code 701 Yaupon Valley Rd West Lake Hills, TX 78746-3545	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) Husch Blackwell LLP	
Date 06/27/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hoffman, Courtney Contributor address; City; State; Zip Code 6107 Mesa Dr Austin, TX 78731-3738	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 22/40 Report: 24/50	
2 FILER NAME Dealey, Amanda		3 ACCOUNT # (Ethics Commission filers) 00000008	
4 Date 06/22/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Holleran, Michael 6 Contributor address; City; State; Zip Code 3811 Ridgelea Dr Austin, TX 78731-6124	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Professor		10 Employer (See Instructions) University of Texas	
Date 06/14/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Johnson, William Contributor address; City; State; Zip Code 4119 W Fm 150 Kyle, TX 78640-8652	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) investor		Employer (See Instructions) self	
Date 05/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jones, Melissa Contributor address; City; State; Zip Code 1203A Elm St Austin, TX 78703-4013	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) community volunteer		Employer (See Instructions) retired	
Date 06/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jones, Melissa Contributor address; City; State; Zip Code 1203A Elm St Apt 3104 Austin, TX 78703-4013	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) community volunteer		Employer (See Instructions) retired	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jordan, Shaun Contributor address; City; State; Zip Code 2235 E 6th St Apt 413 Austin, TX 78702-3450	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Finance		Employer (See Instructions) Abraham Trading Company	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 23/40 Report: 25/50

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

05/23/2014

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

Kadison, Douglas

6 Contributor address; City; State; Zip Code
8127 Chalk Knoll Dr
Austin, TX 78735-1707

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)
Merchant Banker

10 Employer (See Instructions)
Kadison & Company

Date

06/23/2014

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

Kahan, Karen

Contributor address; City; State; Zip Code
1707 Elton Ln
Austin, TX 78703-2913

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)
Fundraiser

Employer (See Instructions)
Seton Healthcare

Date

05/10/2014

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

Kemp, Frances

Contributor address; City; State; Zip Code
2909 Greenlee Dr
Austin, TX 78703-1615

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
homemaker

Employer (See Instructions)
none

Date

05/08/2014

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

Kempner, Harris

Contributor address; City; State; Zip Code
PO Box 119
Galveston, TX 77553-0119

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
money manager

Employer (See Instructions)
KCM

Date

06/26/2014

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

Kentor, Michael B.

Contributor address; City; State; Zip Code
114 W 7th St
Ste 700
Austin, TX 78701-3011

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)
Financial Services

Employer (See Instructions)
The Kentor Co.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 24/40 Report: 26/50

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

05/08/2014

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

6 Contributor address; City; State; Zip Code
2117 Clifton St
Austin, TX 78704-4352

7 Amount of
contribution (\$)

\$200.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
Retired

10 Employer (See Instructions)
Retired

Date

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

06/13/2014

Contributor address; City; State; Zip Code
7207 Villa Maria Ln
Austin, TX 78759-7777

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)
investor

Employer (See Instructions)
self

Date

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

06/30/2014

Contributor address; City; State; Zip Code
4203 Cal Mountain Dr
Austin, TX 78731-3704

Amount of
contribution (\$)

\$100.00

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# _____)
Kozmetsky, Cynthia

06/06/2014

Contributor address; City; State; Zip Code
1301 W 25th St
Ste 300
Austin, TX 78705-4248

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)
Retired

Employer (See Instructions)
KMS Ventures

Date

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

06/06/2014

Contributor address; City; State; Zip Code
1301 W 25th St
Ste 300
Austin, TX 78705-4248

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)
Executive

Employer (See Instructions)
KMS Ventures, Inc.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 25/40 Report: 27/50

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

06/20/2014

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

6 Contributor address; City; State; Zip Code
4906 Shadywood Ln
Dallas, TX 75209-2024

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)
volunteer

10 Employer (See Instructions)
none

Date

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

06/17/2014

Contributor address; City; State; Zip Code
6404 Alasan Cv
Austin, TX 78730-2734

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)
CEO

Employer (See Instructions)
Planned Parenthood of Greater Texas

Date

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

05/22/2014

Contributor address; City; State; Zip Code
12030 Pleasant Panorama Vw
Austin, TX 78738-5309

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Partner

Employer (See Instructions)
RMD Development Partners

Date

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

06/27/2014

Contributor address; City; State; Zip Code
8307 Polar Dr
Austin, TX 78757-8324

Amount of
contribution (\$)

\$100.00

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# _____)
Lewis, Dawn

05/10/2014

Contributor address; City; State; Zip Code
4509 Edgemont Dr
Austin, TX 78731-5223

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 26/40 Report: 28/50

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

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

Little, Emily

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

06/30/2014

6 Contributor address; City; State; Zip Code

1001 E 8th St
Austin, TX 78702-3248

\$250.00

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

9 Principal occupation / Job title (See Instructions)
architect

10 Employer (See Instructions)
Clayton & Little Architects

Date

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

Lockart, Jim

Amount of contribution (\$)

In-kind contribution description (if applicable)

06/30/2014

Contributor address; City; State; Zip Code

4518 Spanish Oak Trl
Austin, TX 78731-5218

\$100.00

(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# _____)

London, Alice

Amount of contribution (\$)

In-kind contribution description (if applicable)

06/26/2014

Contributor address; City; State; Zip Code

101 Ridgemont Ct
West Lake Hills, TX 78746-5498

\$250.00

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

Principal occupation / Job title (See Instructions)
attorney

Employer (See Instructions)
Bishop London & Dodds

Date

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

Longley, Susan

Amount of contribution (\$)

In-kind contribution description (if applicable)

05/08/2014

Contributor address; City; State; Zip Code

606 W Lynn St
Apt 23
Austin, TX 78703-4759

\$350.00

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

Principal occupation / Job title (See Instructions)
Public Relations

Employer (See Instructions)
Self

Date

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

Lorenz, Perry

Amount of contribution (\$)

In-kind contribution description (if applicable)

06/05/2014

Contributor address; City; State; Zip Code

1311 E 6th St
Ste A
Austin, TX 78702-3368

\$350.00

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

Principal occupation / Job title (See Instructions)
Real Estate

Employer (See Instructions)
Self

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 27/40 Report: 29/50

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)
00000008

4 Date 06/17/2014 5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Lyle, Frances

7 Amount of contribution (\$) 8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
4420 Overton Crest St
Ft Worth, TX 76109-2521

\$350.00

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

9 Principal occupation / Job title (See Instructions)
Retired

10 Employer (See Instructions)
none

Date 05/12/2014 Full name of contributor ☐ out-of-state PAC (ID# _____)
Mandel, Michelle

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
4601 Eby Ln
Austin, TX 78731-4536

\$100.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 05/20/2014 Full name of contributor ☐ out-of-state PAC (ID# _____)
Martin, Carroll

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
3214 Park Hills Dr
Austin, TX 78746-5573

\$250.00

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

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Scott, Douglass & McConnico, LLP

Date 05/22/2014 Full name of contributor ☐ out-of-state PAC (ID# _____)
Martin, Lori

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
5603 Caprice Dr
Austin, TX 78731-4835

\$250.00

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

Principal occupation / Job title (See Instructions)
Development Director

Employer (See Instructions)
Austin Theatre Alliance

Date 06/30/2014 Full name of contributor ☐ out-of-state PAC (ID# _____)
Martin, Lori

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
5603 Caprice Dr
Austin, TX 78731-4835

\$100.00

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

Principal occupation / Job title (See Instructions)
Development Director

Employer (See Instructions)
Austin Theatre Alliance

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 28/40 Report: 30/50

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

06/30/2014

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

6 Contributor address; City; State; Zip Code
PO Box 5543
Austin, TX 78763-5543

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)
Executive Director

10 Employer (See Instructions)
Annie's List

Date

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

05/10/2014

Contributor address; City; State; Zip Code
4504 Tortuga Cv
Austin, TX 78731-4541

Amount of
contribution (\$)

\$100.00

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# _____)
Mauzy, Catherine

06/26/2014

Contributor address; City; State; Zip Code
5203 Shoal Creek Blvd
Austin, TX 78756-1812

Amount of
contribution (\$)

\$150.00

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# _____)
McCarthy, Valerie

06/24/2014

Contributor address; City; State; Zip Code
1075 Stewart Ave
Garden City, NY 11530-4812

Amount of
contribution (\$)

\$100.00

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# _____)
McDonald, John

06/05/2014

Contributor address; City; State; Zip Code
5406 Maryanna Dr
Austin, TX 78746-1226

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)
Executive

Employer (See Instructions)
Upland Software, Inc.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 29/40 Report: 31/50

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

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

McHenry, Luke

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

05/10/2014

6 Contributor address; City; State; Zip Code

1914 Pasadena Dr
Austin, TX 78757-2227

\$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# _____)

McKenzie, JoAnn

Amount of contribution (\$)

In-kind contribution description (if applicable)

06/30/2014

Contributor address; City; State; Zip Code

6902 Edgefield Dr
Austin, TX 78731-2908

\$350.00

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

Principal occupation / Job title (See Instructions)
wealth transfer, business succession, and insurance
planning

Employer (See Instructions)
JoAnn McKenzie LLC

Date

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

Meisenbach, Albert

Amount of contribution (\$)

In-kind contribution description (if applicable)

05/11/2014

Contributor address; City; State; Zip Code

1800 San Gabriel St
Austin, TX 78701-1031

\$300.00

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

Principal occupation / Job title (See Instructions)
Flutist

Employer (See Instructions)
University of Texas

Date

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

Mettlen, Robert

Amount of contribution (\$)

In-kind contribution description (if applicable)

06/25/2014

Contributor address; City; State; Zip Code

3707 Hidden Holw
Austin, TX 78731-1508

\$100.00

(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# _____)

Mills, Bonnie

Amount of contribution (\$)

In-kind contribution description (if applicable)

05/12/2014

Contributor address; City; State; Zip Code

4702 Shadow Ln
Austin, TX 78731-5335

\$350.00

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

Principal occupation / Job title (See Instructions)
Investor

Employer (See Instructions)
Self-employed

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 30/40 Report: 32/50

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

05/22/2014

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

6 Contributor address; City; State; Zip Code
3301 Stratford Hills Ln
Austin, TX 78746-4686

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)
retired

10 Employer (See Instructions)
retired

Date

06/25/2014

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

Contributor address; City; State; Zip Code
4501 House Of Lancaster
Austin, TX 78730-3412

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/30/2014

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

Contributor address; City; State; Zip Code
3512 Lakeland Dr
Austin, TX 78731-4846

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)
appraiser

Employer (See Instructions)
self

Date

05/09/2014

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

Contributor address; City; State; Zip Code
10717 Sans Souci Pl
Austin, TX 78759-5182

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/31/2014

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

Contributor address; City; State; Zip Code
3120 Above Stratford Pl
Austin, TX 78746-4600

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 31/40 Report: 33/50	
2 FILER NAME Dealey, Amanda		3 ACCOUNT # (Ethics Commission filers) 00000008	
4 Date 06/13/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nelson, P. 6 Contributor address; City; State; Zip Code 7207 Villa Maria Ln Austin, TX 78759-7777	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Engineer		10 Employer (See Instructions) CSE Service Mesh	
Date 05/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Niland, Nona Contributor address; City; State; Zip Code 210 Lavaca St Apt 3005 Austin, TX 78701-4598	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) none	
Date 05/28/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nowlin, Bettye Contributor address; City; State; Zip Code 3327 Far View Dr Austin, TX 78730-3300	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) none		Employer (See Instructions) none	
Date 05/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Olson, Kris Contributor address; City; State; Zip Code 3708 Chimney Ridge Dr Waco, TX 76708-2368	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) volunteer		Employer (See Instructions) none	
Date 06/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Peavy, Angier Contributor address; City; State; Zip Code 6851 State Highway 94 Lufkin, TX 75904-6618	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) foreign service officer		Employer (See Instructions) retired	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 32/40 Report: 34/50

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

05/22/2014

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

6 Contributor address; City; State; Zip Code
1800 W 6th St
Austin, TX 78703-4795

7 Amount of
contribution (\$)

\$100.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

06/24/2014

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

Contributor address; City; State; Zip Code
110 Las Lomas Dr
West Lake Hills, TX 78746-5488

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)
Senior VP

Employer (See Instructions)
UBS Financial Services

Date

06/25/2014

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

Contributor address; City; State; Zip Code
2311 Woodlawn Blvd
Austin, TX 78703-2447

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)
Attorney

Employer (See Instructions)
self

Date

05/10/2014

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

Contributor address; City; State; Zip Code
PO Box 50038
Austin, TX 78763-0038

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)
contractor

Employer (See Instructions)
Pinnelli & Pinnelli

Date

05/10/2014

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

Contributor address; City; State; Zip Code
PO Box 50038
Austin, TX 78763-0038

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)
contractor

Employer (See Instructions)
Pinnelli & Pinnelli

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 33/40 Report: 35/50

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

06/23/2014

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

6 Contributor address; City; State; Zip Code
1707 Elton Ln
Austin, TX 78703-2913

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)
Attorney

10 Employer (See Instructions)
Austin Community Foundation

Date

06/26/2014

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

Contributor address; City; State; Zip Code
3702 Balcones Dr
Austin, TX 78731-5806

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)
Public Affairs

Employer (See Instructions)
Julian Read Associates

Date

05/09/2014

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

Contributor address; City; State; Zip Code
5403 Tortuga Trl
Austin, TX 78731-4535

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)
attorney

Employer (See Instructions)
Reeves & Brightwell, L.L.P.

Date

06/21/2014

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

Contributor address; City; State; Zip Code
1104 Wayside Dr
Austin, TX 78703-3714

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/22/2014

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

Contributor address; City; State; Zip Code
7102 Coachwhip Holw
Austin, TX 78750-8202

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
none

Employer (See Instructions)
none

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 34/40 Report: 36/50

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

06/27/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Rivers, Adrienne6 Contributor address; City; State; Zip Code
2705 Wooldridge Dr
Austin, TX 78703-19537 Amount of
contribution (\$)

\$250.00

8 In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐9 Principal occupation / Job title (See Instructions)
Attorney10 Employer (See Instructions)
self

Date

06/23/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Rivers, RichelContributor address; City; State; Zip Code
1209 W 5th St
Ste 200
Austin, TX 78703-5287Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
attorneyEmployer (See Instructions)
Rivers McNamara, PLLC

Date

06/14/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Sanger, MaryContributor address; City; State; Zip Code
704 Carolyn Ave
Austin, TX 78705-1712Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
Research specialistEmployer (See Instructions)
Environmental Defense

Date

06/16/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Saunders, C. StephenContributor address; City; State; Zip Code
2630 Exposition Blvd
Ste 203
Austin, TX 78703-1763Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
attorneyEmployer (See Instructions)
Saunders, Norval, Pargaman & Atkins

Date

06/17/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Scanlan, JohnContributor address; City; State; Zip Code
219 E Marcy St
Santa Fe, NM 87501-2020Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
Gallery OwnerEmployer (See Instructions)
Verve Gallery of Photography, Santa Fe, New Mexico

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 35/40 Report: 37/50

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

05/09/2014

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

Scanlan, Nancy

6 Contributor address; City; State; Zip Code

4513 Balcones Dr
Austin, TX 78731-52197 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)
photographer10 Employer (See Instructions)
self employed

Date

05/12/2014

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

Schenker, Melissa

Contributor address; City; State; Zip Code

1500 Scenic Dr
Apt 200
Austin, TX 78703-2044Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/10/2014

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

Schenkan, Frances

Contributor address; City; State; Zip Code

117 Laurel Ln
Austin, TX 78705-2813Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/08/2014

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

Schlaud, Paul

Contributor address; City; State; Zip Code

7003 Shoal Creek Blvd
Austin, TX 78757-4385Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
AttorneyEmployer (See Instructions)
Reeves Brightwell LLP

Date

05/12/2014

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

Schraad, Jacqui

Contributor address; City; State; Zip Code

1304 Kinney Ave
Austin, TX 78704-2250Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 36/40 Report: 38/50	
2 FILER NAME Dealey, Amanda				3 ACCOUNT # (Ethics Commission filers) 00000008	
4 Date 05/12/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sharpe, Molly		7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)	
6 Contributor address; City; State; Zip Code 1805 Exposition Blvd Austin, TX 78703-2833			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions) Event Management			10 Employer (See Instructions) Molly Sharpe & Associates		
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shaw, David		Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 7206 Running Rope Austin, TX 78731-2144			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 05/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shipley, Donna		Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 2102 Mountain View Rd Austin, TX 78703-2206			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) CEP			Employer (See Instructions) Shipley & Associates		
Date 06/29/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shipley, George		Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 919 Congress Ave Ste 750 Austin, TX 78701-2160			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) CEO			Employer (See Instructions) Shipley & Associates		
Date 06/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Bea Ann		Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 1610 Hartford Rd Austin, TX 78703-3314			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Mediator/professor			Employer (See Instructions) Self/University of Texas		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 37/40 Report: 39/50

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

06/12/2014

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

6 Contributor address; City; State; Zip Code
2512 Wooldridge Dr
Austin, TX 78703-2536

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)
Retired

Date

06/22/2014

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

Contributor address; City; State; Zip Code
4709 Harmon Ave
Apt 306
Austin, TX 78751-3423

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)
Intake Specialist

Employer (See Instructions)
Department of Family and Protective Services

Date

05/30/2014

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

Contributor address; City; State; Zip Code
800 W 5th St
Apt 1102
Austin, TX 78703-5446

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)
Professor

Employer (See Instructions)
UT Austin

Date

05/27/2014

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

Contributor address; City; State; Zip Code
2940 Northampton St NW
Washington, DC 20015-1226

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)
Attorney

Employer (See Instructions)
Kaye Scholer LLP

Date

06/21/2014

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

Contributor address; City; State; Zip Code
240 Mercer St
1301
New York, NY 10012-1590

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)
Acting Assistant Professor of Tax Law

Employer (See Instructions)
New York University School of Law

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 38/40 Report: 40/50

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

05/10/2014

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

6 Contributor address; City; State; Zip Code
4302 Edgemont Dr
Austin, TX 78731-5720

7 Amount of
contribution (\$)

\$100.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

05/22/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Steed, LaVada Jackson

Contributor address; City; State; Zip Code
3201 Bridle Path
Austin, TX 78703-2709

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/30/2014

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

Contributor address; City; State; Zip Code
6404 Alasan Cv
Austin, TX 78730-2734

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)
CEO

Employer (See Instructions)
League of Historic American Theatres

Date

06/27/2014

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

Contributor address; City; State; Zip Code
3605 Windsor Rd
Austin, TX 78703-1508

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)
Social Worker

Employer (See Instructions)
Retired

Date

06/05/2014

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

Contributor address; City; State; Zip Code
12140 Tunnel Trl
Manchaca, TX 78652-3827

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
builder

Employer (See Instructions)
Moore-Tate

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The **INSTRUCTION GUIDE** explains how to complete this form.

1 PAGE #

Schedule: 39/40 Report: 41/50

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

06/09/2014

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

6 Contributor address; City; State; Zip Code
4806 Balcones Dr
Austin, TX 78731-5309

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)
Managing Partner

10 Employer (See Instructions)
Corridor Television

Date

06/17/2014

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

Contributor address; City; State; Zip Code
3701 Bonnie Rd
Austin, TX 78703-2002

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)
Attorney

Employer (See Instructions)
self

Date

06/12/2014

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

Contributor address; City; State; Zip Code
210 Lee Barton Dr
Unit 201
Austin, TX 78704-1044

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)
Physician

Employer (See Instructions)
Seton

Date

06/19/2014

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

Contributor address; City; State; Zip Code
7126 Valburn Dr
Austin, TX 78731-1819

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)
President

Employer (See Instructions)
Focus Strategies

Date

06/30/2014

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

Contributor address; City; State; Zip Code
2701 Bartons Bluff Ln
Austin, TX 78746-7944

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)
Owner

Employer (See Instructions)
Vogel Farms Energy

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 40/40 Report: 42/50

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

05/21/2014

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

Whatley, Melba

6 Contributor address; City; State; Zip Code

PO Box 5623
Austin, TX 78763-5623

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)
Oil and Gas

10 Employer (See Instructions)
Clarite Holdings LLC

Date

05/21/2014

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

Whatley, Ted

Contributor address; City; State; Zip Code

2909 W 35th St
Austin, TX 78703-1105

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)
Former Teacher

Employer (See Instructions)
Retired

Date

06/30/2014

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

Winkelman, Marc

Contributor address; City; State; Zip Code

304 Hillcrest Ct
West Lake Hills, TX 78746-5491

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)
Executive

Employer (See Instructions)
Calendar Services, Inc.

LOANS**SCHEDULE E**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/1 Report: 43/50	
2 FILER NAME Dealey, Amanda		3 ACCOUNT # (Ethics Commission filers) 00000008	
4 TOTAL OF UNITEMIZED LOANS: ⇄⇄⇄⇄⇄⇄			\$
5 Date of loan 04/28/2014	7 Name of lender Dealey, Amanda <input type="checkbox"/> out-of-state PAC (ID# _____)		9 Loan Amount (\$) \$100.00
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code		10 Interest rate
			11 Maturity date 11/04/2014
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)	
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: 1/4 Report: 44/50		2 FILER NAME Dealey, Amanda		3 ACCOUNT # (TEC filers) 00000008	
4 Date 04/22/2014	5 Payee name Checkmark Typesetting				
6 Amount (\$) \$405.94	7 Payee address City: State: Zip Code 3217 N. IH 35 Austin, TX 78722				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing <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 06/03/2014	Payee name First Data				
Amount (\$) \$140.38	Payee address City: State: Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit card processing 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 06/03/2014	Payee name First Data				
Amount (\$) \$114.51	Payee address City: State: Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit card processing 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 06/03/2014	Payee name First Data				
Amount (\$) \$112.55	Payee address City: State: Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit card processing 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:

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: 2/4 Report: 45/50		2 FILER NAME Dealey, Amanda		3 ACCOUNT # (TEC filers) 00000008	
4 Date 05/14/2014		5 Payee name GNI Strategies, LLC			
6 Amount (\$) \$6,050.64		7 Payee address City: State: Zip Code P.O. Box 685008 Austin, TX 78768			
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"/> General management, event expenses, printing, polling, online advertising <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 05/27/2014		Payee name Newton, Scott			
Amount (\$) \$433.00		Payee address City: State: Zip Code 3012 Oak Crest Ave. Austin, TX 78704			
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"/> Photography <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 06/17/2014		Payee name NGP Van, Inc.			
Amount (\$) \$750.00		Payee address City: State: Zip Code 1101 15th Street, NW, Suite 500 Washington, DC 20005			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Database software <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 05/14/2014		Payee name Susan Harry Consulting, LLC			
Amount (\$) \$1,300.00		Payee address City: State: Zip Code P.O. Box 301074 Austin, TX 78703			
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"/> Fundraising & compliance consulting <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: 3/4 Report: 46/50		2 FILER NAME Dealey, Amanda		3 ACCOUNT # (TEC filers) 00000008	
4 Date 06/02/2014	5 Payee name Susan Harry Consulting, LLC				
6 Amount (\$) \$1,300.00	7 Payee address City: State: Zip Code P.O. Box 301074 Austin, TX 78703				
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"/> Fundraising & compliance consulting		
	<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 06/06/2014	Payee name Thompson & Knight LLP				
Amount (\$) \$265.00	Payee address City: State: Zip Code P.O. Box 660684 Dallas, TX 75266-0684				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Legal Services		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> legal compliance consulting		
	<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 03/21/2014	Payee name Worley Printing Co.				
Amount (\$) \$529.34	Payee address City: State: Zip Code 3217 North IH 35 Austin, TX 78722				
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		
	<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 04/18/2014	Payee name Worley Printing Co.				
Amount (\$) \$147.22	Payee address City: State: Zip Code 3217 North IH 35 Austin, TX 78722				
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		
	<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: 4/4 Report: 47/50		2 FILER NAME Dealey, Amanda		3 ACCOUNT # (TEC filers) 00000008	
4 Date 05/19/2014		5 Payee name Worley Printing Co.			
6 Amount (\$) \$4,170.24		7 Payee address City; State; Zip Code 3217 North IH 35 Austin, TX 78722			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Yard Signs <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 06/06/2014		Payee name Worley Printing Co.			
Amount (\$) \$31.12		Payee address City; State; Zip Code 3217 North IH 35 Austin, TX 78722			
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 <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: 1/3 Report: 48/50		2 FILER NAME Dealey, Amanda		3 ACCOUNT # (TEC filers) 00000008	
4 Date 05/30/2014		5 Payee name Anderson Coffee			
6 Amount (\$) \$206.23 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address City: State: Zip Code 1601 West 28th St. Ste. 2 Austin, TX 78731			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> event expenses <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Date 03/01/2014		Payee name Chez Zee			
Amount (\$) \$500.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address City: State: Zip Code 5406 Balcones Dr Austin, TX 78731			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> food & beverages for event <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Date 03/31/2014		Payee name Chez Zee			
Amount (\$) \$525.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address City: State: Zip Code 5406 Balcones Dr Austin, TX 78731			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> food & beverages for event <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Date 04/14/2014		Payee name Clary, Anne			
Amount (\$) \$175.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address City: State: Zip Code 1510 Newning Ave 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"/> Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

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: 2/3 Report: 49/50		2 FILER NAME Dealey, Amanda		3 ACCOUNT # (TEC filers) 00000008	
4 Date 05/12/2014		5 Payee name Clary, Anne			
6 Amount (\$) \$375.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address City: State: Zip Code 1510 Newning Ave Austin, TX 78704			
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"/> Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Date 06/02/2014		Payee name Clary, Anne			
Amount (\$) \$812.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address City: State: Zip Code 1510 Newning Ave 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"/> Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Date 06/30/2014		Payee name Clary, Anne			
Amount (\$) \$781.25 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address City: State: Zip Code 1510 Newning Ave 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"/> Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Date 02/27/2014		Payee name GNI Strategies, LLC			
Amount (\$) \$3,250.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address City: State: Zip Code P.O. Box 685008 Austin, TX 78768			
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"/> General management <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

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: 3/3 Report: 50/50		2 FILER NAME Dealey, Amanda		3 ACCOUNT # (TEC filers) 00000008	
4 Date 03/24/2014		5 Payee name GNI Strategies, LLC			
6 Amount (\$) \$3,500.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address City; State; Zip Code P.O. Box 685008 Austin, TX 78768			
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"/> General management <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Date 04/22/2014		Payee name GNI Strategies, LLC			
Amount (\$) \$2,161.42 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code P.O. Box 685008 Austin, TX 78768			
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"/> General management <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Date 06/26/2014		Payee name The Headliners Club			
Amount (\$) \$384.75 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code 221 W 6th St Austin, TX 78701			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event expenses <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Date 06/30/2014		Payee name Wonk Consulting			
Amount (\$) \$125.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code 1163 Poquito St Austin, TX 78702			
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"/> Consulting <input type="checkbox"/> Check if Austin, TX, officeholder living expense	