CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guid	e explains how to complete this		ACCOUNT # (Ethics Commission filers)	2 PAGE#			
			12121212	1 of 7			
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRS Mr. Edwin	ST	Mil	OFFICE USE ONLY Date Received	;		
	NICKNAME LAS' Ed Engli		SUFFIX	RECE 0 8			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE : 12704 Europa Lane Austin, TX 78727-5131	#; CITY;	STATE; ZIP CODE	Date Hand-delivered or Date Postmen	<u>.</u>		
Change of Address	Austin, 12/6/2/-5131			01			
5 CAMPAIGN	MS / MRS / MR FIRS	ST.	Mi	Receipt # Amount Date Processed			
TREASURER NAME	Mr. Edwin		•••	Date Imaged			
	NICKNAME LAS' Ed Englis		SUFFIX	· I————————————————————————————————————			
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	street address (NO PO BOX PLEASE 12704 Europa Lane Austin, TX 78727-5131	E); APT / SUITE #;	CITY: STATE;	ZIP CODE			
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUM (512) 835-0000	BER	EXTENSION				
8 REPORT TYPE	January 15 30th	day before election	Runoff	15th day after campaign treasurer appointment (officeholder only)	,		
	July 15 8th d	ay before election	Exceeded \$500 fimit	Final report (Attach C/OH - FR)			
9 PERIOD COVERED	Month Day Year		Month D	ay Year			
·	10/26/2014	THROUGH	12/06/	2014			
10 ELECTION	ELECTION DATE Month Day Year	ELECTION TYPE	Runoff [ズ General Special			
	11/04/2014						
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if km				
GO TO PAGE 2							

Signature of officer administering oath

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512)463-5800 TDD 1-800-735-2989 **CANDIDATE / OFFICEHOLDER REPORT:** FORM C/OH COVER SHEET PG 2 SUPPORT & TOTALS 13 C/OH NAME English, Edwin (Mr.) 14 ACCOUNT # (Ethics Commission filers) 12121212 ... This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may **15 NOTICE** have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this FROM information only if they receive notice of such expenditures. .. **POLITICAL** COMMITTEE NAME COMMITTEE TYPE COMMITTEE(S) **GENERAL** COMMITTEE ADDRESS SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME additional pages COMMITTEE CAMPAIGN TREASURER ADDRESS **16 CONTRIBUTION** TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN 1 0.00 \$ **TOTALS** PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED **TOTAL POLITICAL CONTRIBUTIONS** \$ 170.00 (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) **EXPENDITURE** TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED **TOTALS** \$ 0.00 **TOTAL POLITICAL EXPENDITURES** 4. \$ 8,337.62 CONTRIBUTION TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE BALANCE 0.00 LAST DAY OF THE REPORTING PERIOD **OUTSTANDING** TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LOAN TOTALS LAST DAY OF THE REPORTING PERIOD 2,634.17 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 THOMAS A. GRAUZER me under Title 15, Election Code. Notary Public, State of Texas My Commission Expires November 19, 2018 Signature of Candidate or Officeholder AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said ___ , this the _, to certify which, witness my hand and seal of office.

Print name of officer administering oath

Title of officer administering oath

POLITICAL CONTRIBUTIONS

SCHEDULE A

THAN PLEDGES OR LOAI				
ION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/1 Report: 3/7		
English, Edwin (Mr.)		3 ACCOUNT# 12121212	(Ethics Commission filers)	
5 Full name of contributor ut-of-state PAC (ID# Magner, Cynthia	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
6 Contributor address; City; State; Zip Code 12406 Blue Water Circle Austin, TX 78758		\$20.00	1 	
		(if travel outside of	Texas, complete Schedule T)	
pation / Job title (See Instructions)	10 Employer (See In	structions)		
Full name of contributor	<u>; </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 2710 W. 49 1/2 Street Austin. TX 78731		\$50.00	 	
, , , , , , , , , , , , , , , , , , , ,		//6 description of the control of th	·	
pation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule T)	
	Retired	on donorio,		
Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 8207 Stillwood Lane Austin, TX 78757		\$100.00		
		(If travel outside of	Texas, complete Schedule T)	
pation / Job title (See Instructions)	Employer (See In:	<u> </u>	· —	
	English, Edwin (Mr.) 5 Full name of contributor ut-of-state PAC (IDMagner, Cynthia 6 Contributor address; City; State; Zip Code Austin, TX 78758 pation / Job title (See Instructions) Full name of contributor ut-of-state PAC (IDM Contributor address; City; State; Zip Code Austin, TX 78731 Pation / Job title (See Instructions) Full name of contributor ut-of-state PAC (IDM Contributor address; City; State; Zip Code Austin, TX 78731 Full name of contributor ut-of-state PAC (IDM Contributor address; City; State; Zip Code Austin, TX 78757 Contributor address; City; State; Zip Code Austin, TX 78757 pation / Job title (See Instructions)	English, Edwin (Mr.) 5 Full name of contributor	English, Edwin (Mr.) S ACCOUNT # 12121212 5 Full name of contributor ut-of-state PAC (ID#	

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 (512)463-5800 TDD 1-800-735-2989 POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Advertising Expense Accounting/Banking Gifts/Awards/Memorial Expense Legal Services Salarles/Wages/Contract Labor Solicitation/Fundralsing Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Consulting Expense Food/Beverage Expense Travel Out Of District Office Overhead/Rental Expense **Event Expense** Polling Expense Printing Expense The Instruction Guide explains how to complete this form. 1 PAGE# FILER NAME 3 ACCOUNT # (TEC filers) English, Edwin (Mr.) 12121212 Schedule: 1/3 Report: 4/7 4 Date 5 Payee name Abel's North Grill and Tap House 11/01/2014 6 Amount (\$) Payee address City; State; Zip Code 4001 W. Parmer Lane Austin, TX 78727 \$100.00 (If travel outside of Texas, complete Schedule T) 8 (a) Category (See Categories listed at the top of this schedule) (b) Description **PURPOSE** Election Watch Party food and services Event Expense OF **EXPENDITURE** Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Pavee name Abel's North Grill and Tap House 11/04/2014 Payee address Amount (\$) City; State; Zip Code 4001 W. Parmer Lane \$284.25 Austin, TX 78727 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description **PURPOSE** Election Watch Party food and services Event Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 11/12/2014 El Mercado Payee address Amount (\$) City; State; Zip Code 7414 Burnet Road \$85.71 Austin, TX 78757 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** Food and Drinks for Volunteer Appreciation **Event Expense** OF **EXPENDITURE** Check If Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 12/05/2014 English, Edwin Amount (\$) Payee address City: State: Zip Code 12704 Europa Lane Austin, TX 78727 \$7,365.83 Description (If travel outside of Texas, complete Schedule T) Repayment of loan disclosed in 7/15/14 Sch. E filing Category (See Categories listed at the top of this schedule) **PURPOSE** Loan Repayment/Reimbursement **EXPENDITURE**

Complete ONLY if

direct expenditure to benefit C/OH

Candidate / Officeholder name

Office held:

Check if Austin, TX, officeholder living expense

Office sought:

P.O.Box 12070 POLITICAL EXPENDITURES SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

to benefit C/OH

EXPENDITURE CATEGORIES Gifts/Awards/Memorial Expense Legal Services Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Food/Beverage Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Travel Out Of District Office Overhead/Rental Expense Polling Expense OTHER (enter a category not listed above) Printing Expense Fees The Instruction Guide explains how to complete this form. 1 PAGE# FILER NAME 3 ACCOUNT # (TEC filers) English, Edwin (Mr.) 12121212 Schedule: 2/3 Report: 5/7 4 Date 5 Payee name **Local Voice Solutions** 10/27/2014 Payee address 6 Amount (\$) City; State; Zip Code 3700 Thompson St. Austin, TX 78702 \$99.50 (a) Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) 8 (b) Description **PURPOSE** Fundraiser organization and services **Event Expense** OF **EXPENDITURE** Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 10/28/2014 Piryx Amount (\$) Payee address City; State; Zip Code 144 Second St \$79.13 San Francisco, CA 94105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Service Charge Fees OF **EXPENDITURE** Check If Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: to benefit C/OH Date Payee name 11/04/2014 Piryx Amount (\$) Payee address City; State; Zip Code 144 Second St \$8.20 San Francisco, CA 94105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Service Charge Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 11/20/2014 Sorrells, Tim Amount (\$) Payee address City: State: Zip Code P.O. Box 302251 \$270.00 Austin, TX 78703 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) Campaign finance consultation **PURPOSE** Legal Services OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY i Candidate / Officeholder name Office sought: Office held: direct expenditure

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Accounting Banking Legal Services Solicitation/Fundraising Expense Transpol Consulting Expense Food/Beverage Expense Travel In District Contribu Event Expense Polling Expense Travel Out Of District Candi		on/Fundraising Expense Transportation Equipment & Related Expense District Contributions/Donations Made By ut Of District Candidate/Officeholder/Political Committee verhead/Rentał Expense OTHER (enter a category not listed above)
PAGE#	2 FILER NAME	3 ACCOUNT# (TEC filers
Schedule: 3/3 Re		12121212
Date	5 Payee name	12121212
11/04/2014	Tuggey Calvoz	
Amount (\$)	7 Payee address City; State; Zip Code	
\$45.00		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedu Legal Services	(b) Description (If travel outside of Texas, complete Schedule T) Campaign finance consultation
EXPENDITORE		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:

Texas Eth	nics Commission	P.O.Box 12070	Austin, Texas 78711-2070	(512)463-5800	TDD 1-800-735-298
		OFFICEHO N OF FINAL	LDER REPORT: L REPORT	FO	RM C/OH - FR
		ains how to complete Type' on page 1 is ma		Page 7 of 7	· · · · · · · · · · · · · · · · · · ·
1 C/OH I	NAME English, E	Edwin (Mr.)		2 ACCOUNT# 12121212	(Ethics Commission filers)
l do a rej	port as a final report te	rminates my campaign	or political expenditures in connecti treasurer appointment. I also unde	erstand that I may not accept an	
oont	indutions or make any	campaign expenditures	s without a campaign treasurer app	Signature of Candidat	te / Officeholder
	R WHO IS NOT AN (plete A & B below only i	OFFICEHOLDER If you are not an office ho	ider **		
A.	CAMPAIGN FUI	NDS			
Che	ck only one:				
	I do not have unex	pended contributions o	r unexpended interest or income e	arned from political contributions	s.
	convert unexpende also understand th or unexpended into understand that I n	ed political contributions at I must file an annual erest or income earned nust dispose of unexpe	pended interest or income earned f is or unexpended interest or income report of unexpended contribution on political contributions longer the inded political contributions and un- irements of Election Code, § 254.2	e earned on political contribution s and that I may not retain unex an six years after filing this final expended interest or income ear	es to personal use. I pended contributions report. Further, I
В.	ASSETS				
Che	ck only one:				
	I do not retain asse	sts purchased with polit	tical contributions or interest or other	er income from political contribu	tions.
	may not convert as	ssets purchased with po and that I must dispose	contributions or interest or other in plitical contributions or interest or o of assets purchased with political	ther income from political contrit contributions in accordance with	butions to personal n the requirements of
				Signature of C	
				Signature of C	Zandidate
	CEHOLDER plete this section only if	you are an officeholder *	**		
	file. I am also awar as an officeholder,	e that I will be required I retain political contrib	equirements applicable to an office to file reports of unexpended cont utions, interest or other income fro ncome from political contributions.	ributions if, after filing the last re-	quired report
				Signature of O	fficeholder