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 Texas Ethics Commission
 P.O. Box 12070
 Austin, Texas 78711-2070
 (512)463-5800
 TDD 1-800-735-2989

		OFFICEHOLDER		FORI	M C/OH IEET PG 1
Th	e C/OH Instruction Guil	DE explains how to complete this form.	1 ACCOUNT # (Ethics Commission filers) 41966827	2 PAGE # 1 of 10	•
3	CANDIDATE / OFFICEHOLDER	MS/MRS/MR FIRST Monica	MI	OFFICE L	ISE-ONLY
	NAME	NICKNAME LAST Guzman	SUFFIX	Date Received	AUSTIN C RECI 14 DEC 31
4	CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; 605 Masterson Pass Apt 835 Austin, TX 78753	CITY: STATE; ZIP COL		
	Change of Address			Receipt #	2 41 Amount
5	CAMPAIGN TREASURER	MS/MRS/MR FIRST	Mł	Date Processed	• · ·
	NAME	Monica		Date Imaged	
		NICKNAME LAST Guzman	SUFFIX		
6	CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE). APT / 605 Masterson Pass Apt 835 Austin, TX 78753	SUITE #; CITY; STATE;	ZIP CODE	
7	CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (512) 585-5832	EXTENSION		
8	REPORT TYPE	January 15 30th day before e		appointment (o	campaign treasurer fficeholder only) tach C/OH - FR)
 	··				,
9	PERIOD COVERED	Month Day Year	Month	Day Year	
		T⊢ 10/26/2014	ROUGH 12/3	1/2014	
10	ELECTION	ELECTION DATE ELECTION Month Day Year Prin 11/04/2014	N TYPE mary Runoff	X General	Special
11	OFFICE	OFFICE HELD (if any)	12 OFFICE SOUGHT ( City Council Di		
		GO T	O PAGE 2		
L			· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	Electronic Filing Version 3.4.

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## CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

13 C/OH NAME Guzm	14 ACCOUNT # 41966827	(Ethics Commission filers)				
15 NOTICE FROM	have been made with	tice of political expenditures by political committees to support the c out the candidate's or officeholder's knowledge or consent. Candida y receive notice of such expenditures	andidate / officeholder. ates and officeholders ar	These expenditures may re required to report this		
POLITICAL COMMITTEE(S)						
	GENERAL	COMMITTEE ADDRESS				
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS				
16 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00		
,		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	360.00		
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED			. 0.00		
	4. TOTAL I	POLITICAL EXPENDITURES	\$	2,138.91		
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE AY OF THE REPORTING PERIOD	\$	0.00		
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE AY OF THE REPORTING PERIOD	= <b>\$</b>	0.00		
17 AFFIDAVIT				· · · ·		
********	JANNETTE SUE GOOD My Commission Exp July 02, 2016	WICH	s all information requi de.	ired to be reported by		
		Signature of	Candidate or Officeho	blder		
	TAMP / SEAL ABOV	ζ.				
	Sworn to and subscribed before me, by the said <u>MON CO. GUZMAN</u> , this the <u>3</u> day of <u>December</u> , 20 <u>14</u> , to certify which, witness my hand and seal of office.					
Allorto A		Print name of officer administering oath	Title of officer adm	Hary		

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SCHEDULE A

## POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

		·			
		ON GUIDE explains how to complete this form.	· · ·	1 PAGE # Schedule: 1/1	Report: 3/10
2	FILER NAME	Guzman, Monica		3 ACCOUNT # 41966827	(Ethics Commission filers)
4	Date	5 Full name of contributor D out-of-state PAC (ID# Hardeman, Eva	)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/04/2014	6 Contributor address; City; State; Zip Code 9201 Quail Hill Cir Austin, TX 78758		\$300.00	
				(if travel outside of	Texas, complete Schedule T)
9	Principal occup Estate of Eva	ation / Job title (See Instructions) a Hardeman	10 Employer (See In	structions)	
	Date	Full name of contributor Dout-of-state PAC (ID# Hedayati, Hooman	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/04/2014	Contributor address; City; State; Zip Code 12210 Victory Palm San Antonio, TX 78247		\$10.00	
				(if travel outside of	Texas, complete Schedule T)
	Principal occup Unemployed	pation / Job title (See Instructions)	Employer (See In		<u> </u>
	Date	Full name of contributor Dout-of-state PAC (ID# Muszkiewicz, Luke	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/30/2014	Contributor address; City; State; Zip Code 1132 Lincoln St Austin, TX 78702		\$50.00	
				<u> </u>	Texas, complete Schedule T)
	Principal occup Information re	pation / Job title (See Instructions) equested	Employer (See In Pure Dev	structions)	
					<u> </u>
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LOANS				SCHEDULE E
The Instruction Gui	DE explains how to complete this form.		1 PAGE # Schedule: 1/1	Report: 4/10
2 FILER NAME GU	uzman, Monica		3 ACCOUNT# ( 41966827	Ethics Commission filers)
4 TOTAL OF UNI	TEMIZED LOANS:	<b>⇔</b> ⇔⇔⇔⇔		\$
5 Date of Ioan 11/04/2014	Guzman, Monica A	of-state PAC (ID#		9 Loan Amount (\$) \$350.00
6 Is lender a financial Institution?		Zip Code		10 Interest rate
No		•		11 Maturity date
12 Principal occupation	/ Job title (See Instructions)	13 Employer (See Instruct	tions)	
14 Description of Collat	eral	15 Check if personal fund:	s were deposited int	o political account
16 GUARANTOR INFORMATION	17 Name of guarantor			19 Amount Guaranteed (\$)
X not applicable	18 Guarantor address; City; State;	Zip Code		
20 Principal Occupation	n 	21 Employer		· · · · · · · · · · · · · · · · · · ·
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POLITIC	AL EXPENDITURES		SCHEDULE F
Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	nse Gifts/Awards/Memorial Expense ing Legal Services Ise Food/Beverage Expense Polling Expense Printing Expense	NTURE CATEGORIES Salaries/Wages/Contract Lab Solicitation/Fundraising Expe Travel In District Travel Out Of District Office Overhead/Rental Expe abe explains how to comp	ense Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee ense OTHER (enter a category not listed above)
1 PAGE # Schedule: 1/1 Re	2 FILER NAME Guzman, Monica		3 ACCOUNT # (TEC filers) 41966827
4 Date 10/31/2014	5 Payee name Facebook Inc		
6 Amount (\$) \$13.94	7 Payee address City; State; Department 415 PO Box 10005 Palo Alto, CA 94303	Zip Code	· · · · · · · · · · · · · · · · · · ·
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Advertising Expense		escription (If travel outside of Texas, complete Schedule T) acebook Boost
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	<b></b>	Office sought: Office held:
Date	Payee name		
11/04/2014	Facebook Inc Payee address City; State;	Zin Code	
Amount (\$) \$50.77	Department 415 PO Box 10005 Palo Alto, CA 94303		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of Advertising Expense		escription (If travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought: Office held:
Date 11/26/2014	Payee name Facebook Inc		
Amount (\$)		Zip Code	
\$9.23	Department 415 PO Box 10005 Palo Alto, CA 94303		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of t Advertising Expense		escription (If travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought: Office held:
Date 12/09/2014	Payee name Guzman, Monica		
Amount (\$) \$548.09	Payee address City; State; 605 Masterson Pass Apt 835 Austin, TX 78753	Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of t OTHER - Loan Repayment	this schedule) De Lo	escription (If travel outside of Texas, complete Schedule T)  oan Payment Reimbursement
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought: Office held: Electronic Filing Version 3.

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	AL EXPENDITURES ROM PERSONAL FUNDS	SCHEDULE G
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ng Legal Services Solicitation/Fundrais	Intract Labor     Loan Repayment/Reimbursement       sing Expense     Transportation Equipment & Related Expense       Contributions/Donations Made By     Candidate/Officeholder/Political Committee       t     Candidate/Officeholder/Political Committee       ntal Expense     OTHER (enter a category not listed above)
1 PAGE # Schedule: 1/3 Re	2 FILER NAME Guzman, Monica	3 ACCOUNT # (TEC filers) 41966827
4 Date 10/27/2014	5 Payee name Café Java	
6 Amount (\$) \$12.80 X Reimbursement from political contributions intended	7 Payee address City; State: Zip Code 11900 Metric Blvd Austin, TX 78758	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description (If travel outside of Texas, complete Schedule T) Breakfast meeting
Date 11/02/2014	Payee name Esquivel, Joel	
Amount (\$)	Payee address City; State; Zip Code	
\$288.00 Reimbursement from political contributions intended	11833 Chambers Peak Cv Del Valle, TX 78617	
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) Block walking
Date 11/08/2014	Payee name Esquivel, Joel	
Amount (\$)	Payee address City; State; Zip Code	
\$30.00 Reimbursement from political contributions intended	11833 Chambers Peak Cv Del Valle, TX 78617	
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) Block walking
Date	Payee name	
10/26/2014	Johnson, Cierra	
Amount (\$) \$108.00 Reimbursement from political contributions intended	Payee address City; State; Zip Code 605 Masterson Pass Apt 823 Austin, TX 78753	
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) Block walking

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SCHEDULE G

POLIT	ICAL E	EXPEN	DITUR	ES
MADE	FRON	I PERS	SONAL	FUNDS

	EXPENDITURE CATEGO	DRIES
Advertising Exper Accounting/Banki Consulting Exper Event Expense Fees	nse Gifts/Awards/Memorial Expense Salaries/Wages/Co ng Legal Services Solicitation/Fundrais	ntract Labor Loan Repayment/Reimbursement sing Expense Transportation Equipment & Related Expense Contributions/Donations Made By ct Candidate/Officeholder/Political Committee intal Expense OTHER (enter a category not listed above)
1 PAGE #	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 2/3 Re		41966827
4 Date	5 Payee name	
11/0 <u>2/2014</u>	Johnson, Cierra	
6 Amount (\$) \$311.04 X Reimbursement from political contributions intended	7 Payee address City; State; Zip Code 605 Masterson Pass Apt 823 Austin, TX 78753	
8 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)
Date 11/03/2014	Payee name Martinez, Gabriel	
Amount (\$)	Payee address City; State; Zip Code	
\$15.00 Reimbursement from political contributions intended	415 Chisolm Valley Round Rock, TX 78681	
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) Block walking
Date	Payee name	
10/26/2014	Silva, Emily	
Amount (\$) \$60.00 X Reimbursement from political contributions intended	Payee address City; State; Zip Code 605 Masterson Pass Apt 213 Austin, TX 78753	
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)
Date 11/02/2014	Payee name Silva, Emily	
Amount (\$)	Payee address City; State; Zip Code	
\$311.04 Reimbursement from political contributions intended	605 Masterson Pass Apt 213 Austin, TX 78753	
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)

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	POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS				
Advertising Expe Accounting/Banki Consulting Exper Event Expense Fees	nse Gifts/Awards/Memorial Expense ng Legal Services _	ITURE CATEGOI Salaries/Wages/Cont Solicitation/Fundraisi Travel In District Travel Out Of District Office Overhead/Ren DE explains how to	ract Labor ng Expense tal Expense	Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) n.	
1 PAGE # Schedule: 3/3 Re	2 FILER NAME Guzman, Monica			3 ACCOUNT # (TEC filers) 41966827	
4 Date 11/07/2014	5 Payee name Silva, Emily				
6 Amount (\$) \$100.00 Reimbursement from political contributions intended	7 Payee address City; State; 2 605 Masterson Pass Apt 213 Austin, TX 78753	Zip Code			
8 OF EXPENDITURE	(a) Category (See Categories listed at the top of th Salaries/Wages/Contract Labor	nis schedule)	(b) Description ( Block walking	f travel outside of Texas, complete Schedule T)	
Date 10/28/2014	Payee name Warner, Zachary			<u></u>	
Amount (\$) \$98.00 Reimbursement from political contributions intended	Payee address City; State; 2 1322 Lamar Sq Dr Apt 221 Austin, TX 78704	Zip Code			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of the Salaries/Wages/Contract Labor	nis schedule)	Description Block walking	f travel outside of Texas, complete Schedule T)	
Date 11/07/2014	Payee name Warner, Zachary	<u>.                                    </u>			
Amount (\$) \$75.00 Reimbursement from political contributions intended		Zip Code			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of the Salaries/Wages/Contract Labor	nis schedule)	Description Block walking	f travel outside of Texas, complete Schedule T)	
Date 10/29/2014	Payee name Watson, Braluhn				
Amount (\$) \$108.00 X Reimbursement from political contributions intended	Payee address City; State; 2 2613 Market Garden Ln Austin, TX 78745	Zip Code			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of the Salaries/Wages/Contract Labor	nis schedule)	Description Block walking	f travel outside of Texas, complete Schedule T)	

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NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS						SCHEDULE I		
Advertising Expense         Gifts/Awards/Memorial Expense           Accounting/Banking         Legal Services           Consulting Expense         Food/Beverage Expense           Event Expense         Polling Expense           Fees         Printing Expense		wards/Memorial Expense Services Beverage Expense J Expense g Expense	Salaries/Wages/Contract Labor         Loan Reparation/Fundraising Expense           Solicitation/Fundraising Expense         Transporte           Travel In District         Contribution			payment/Reimbursement lation Equipment & Refated Expense ions/Donations Made By late/Officeholder/Political Committee enter a category not (listed above)		
1 PAGE # Schedule: 1/3 Re	eport: 9/10	2 FILER NAME Guzman, Monica			3	ACCOUNT # 41966827	(TEC filers)	
4 Date	5 Payee name Dollar Fiest							
10/26/2014 6 Amount (\$) \$13.54	7 Payee addre	ss City; State; nar Blvd	Zip Code					
8 OF EXPENDITURE	Contributio	ee Categories listed at the top on ns/Donations Made By Officeholder/Political Cor			See instructions regard Festival: Hallowed		ation required.)	
Date	Payee name							
10/26/2014 Amount (\$)	HEB Payee addre	ss City; State;	Zip Code					
\$89.14	9414 N Lar Austin, TX	nar Blvd						
PURPOSE OF EXPENDITURE	Contributio	ee Categories listed at the top on ns/Donations Made By Officeholder/Political Cor			See instructions regard Festival: candy	ding type of inform	ation required.)	
Date	Payee name		<u> </u>					
10/30/2014	PayPal							
Amount (\$) \$1.75	Payee addre 2211 N 1st San Jose,	St	Zip Code					
PURPOSE OF EXPENDITURE	Category (S Fees	ee Categories listed at the top o	of this schedule)	Description ( Processing	(See instructions regard	ding type of inform	iation required.)	
Date	Payee name							
11/04/2014 Amount (\$)	PayPal Payee addre	ss City; State;	Zip Code		<u> </u>			
\$0.59		St	· · · · · ·					
PURPOSE OF EXPENDITURE	Category (S Fees	ee Categories listed at the top o	of this schedule)	Description ( Processing	(See instructions regard fee	ding type of inform	lation required.)	

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CA	NDIDATE/OFFICEHOLDER REPORT: SIGNATION OF FINAL REPORT	FORM C/OH - FR
The In ** Con	struction Guide explains how to complete this form. nplete only if 'Report Type' on page 1 is marked 'Final Report' **	Page 10 of 10
1 C/OH	NAME Guzman, Monica	2 ACCOUNT # (Ethics Commission filers) 41966827
3 SIGN	ATURE	· · · · · · · · · · · · · · · ·
a re	not expect any further political contributions or political expenditures in connection with n port as a final report terminates my campaign treasurer appointment. I also understand the tributions or make any campaign expenditures without a campaign treasurer appointment	hat I may not accept any campaign
	R WHO IS NOT AN OFFICEHOLDER plete A & B below only if you are not an officeholder **	
Α.	CAMPAIGN FUNDS	
Che	nck only one:	
	I do not have unexpended contributions or unexpended interest or income earned fro	om political contributions.
	I have unexpended contributions or unexpended interest or income earned from polit convert unexpended political contributions or unexpended interest or income earned also understand that I must file an annual report of unexpended contributions and that or unexpended interest or income earned on political contributions longer than six ye understand that I must dispose of unexpended political contributions and unexpended contributions in accordance with the requirements of Election Code, § 254.204.	on political contributions to personal use. I at I may not retain unexpended contributions ars after filing this final report. Further, I
В.	ASSETS	
Che	ack only one:	
	I do not retain assets purchased with political contributions or interest or other incom	e from political contributions.
	may not convert assets purchased with political contributions or interest or other inco use. I also understand that I must dispose of assets purchased with political contribut	ome from political contributions to personal tions in accordance with the requirements of
		WAG-
	<u> </u>	Sigdature of Candidate
· ·	CEHOLDER Iplete this section only if you are an officeholder <sup>↔</sup>	
	I am aware that I remain subject to filing requirements applicable to an officeholder w file. I am also aware that I will be required to file reports of unexpended contributions as an officeholder, I retain political contributions, interest or other income from politic political contributions or interest or other income from political contributions.	if, after filing the last required report
		Signature of Officeholder

X