

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 3
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST Amanda MI	OFFICE USE ONLY Date Received Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged	
	NICKNAME Mandy LAST Dealey SUFFIX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 300423 Austin, TX 78703		AUSTIN CITY CLERK RECEIVED JUN 15 PM 4:01
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 checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input 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 THROUGH Month Day Year 12/07/2014 12/31/2014		
10 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special 12/16/2014		
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) 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) <input checked="" type="checkbox"/> additional pages	.. 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 <input checked="" type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME Austin Firefighters Public Safety Fund COMMITTEE ADDRESS 7537 Cameron Rd. Austin, TX 78752 COMMITTEE CAMPAIGN TREASURER NAME Denzer, Douglas COMMITTEE CAMPAIGN TREASURER ADDRESS 7537 Cameron Rd. Austin, TX 78752
16 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 585.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 17,535.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 100.81
	4. TOTAL POLITICAL EXPENDITURES	\$ 48,509.23
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 768.77
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 35,100.00

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.



[Signature]
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 January 2015, to certify which, witness my hand and seal of office.

[Signature]
Signature of officer administering oath

Susan Harry
Print name of officer administering oath

Notary
Title of officer administering oath

**CANDIDATE / OFFICEHOLDER REPORT:
NOTICE FROM POLITICAL COMMITTEE(S)****FORM C/OH
ADDENDUM**

Page 3 of 27

C/OH NAME Dealey, Amanda

ACCOUNT # (Ethics Commission filers)

00000008

**17 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☐ GENERAL☒ SPECIFIC**COMMITTEE NAME**

Austinites for Equity

COMMITTEE ADDRESS1812 Centre Creek Dr.
Ste. 310
Austin, TX 78754**COMMITTEE CAMPAIGN
TREASURER NAME**

Kirfman, Jack

**COMMITTEE CAMPAIGN
TREASURER ADDRESS**15408 Interlachen Dr.
Austin, TX 78717**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☒ GENERAL☐ SPECIFIC**COMMITTEE NAME**

Sierra Club Political Committee of Texas

COMMITTEE ADDRESS615 Willow
San Antonio, TX 78202**COMMITTEE CAMPAIGN
TREASURER NAME**

Gonzalez, Hector

**COMMITTEE CAMPAIGN
TREASURER ADDRESS**615 Willow
San Antonio, TX 78202

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 1/14 Report: 4/27

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

00000008

4 Date

12/08/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Andrus, Jon**6** Contributor address; City; State; Zip Code
1611 Northwood Rd
Austin, TX 78703-1945**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)
Real Estate**10** Employer (See Instructions)
Austin Retail Partners

Date

12/07/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Apt, WilliamContributor address; City; State; Zip Code
812 San Antonio
Ste. 401
Austin, TX 78701Amount 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

12/08/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Armstrong, ValerieContributor address; City; State; Zip Code
212 Lavaca St
Ste 300
Austin, TX 78701-3955Amount of
contribution (\$)

\$350.00

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

12/08/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Armstrong, WilliamContributor address; City; State; Zip Code
212 Lavaca St
Ste 300
Austin, TX 78701-3955Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
PresidentEmployer (See Instructions)
Stratus Properties

Date

12/15/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Arndt, ThomasContributor address; City; State; Zip Code
19907 Kennemer Dr.
Pflugerville, TX 78660Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
Central Texas Division ManagerEmployer (See Instructions)
Dannenbaum Engineering

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 2/14 Report: 5/27

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

12/12/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Bailey, Debra6 Contributor address; City; State; Zip Code
8500 Andreas Cv
Austin, TX 78759-79267 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

12/10/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Bailey, KenContributor address; City; State; Zip Code
4004 Merimac
Austin, TX 78731-1307Amount 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

12/08/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Baird, CharlesContributor address; City; State; Zip Code
6116 Pebble Garden Ct
Austin, TX 78739-1738Amount of
contribution (\$)

\$350.00

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

Date

12/11/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Baldridge, R. BurtonContributor address; City; State; Zip Code
1518 Mohle Dr
Austin, TX 78703-1936Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
ArchitectEmployer (See Instructions)
Baldridge Architects

Date

12/10/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Bartoletti, KarenContributor address; City; State; Zip Code
504 Terrace Mountain Dr
West Lake Hills, TX 78746-3638Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
LawyerEmployer (See Instructions)
Hughes Vanderburg Williams Bartoletti

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 3/14 Report: 6/27

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

12/12/2014

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

6 Contributor address; City; State; Zip Code
11023 Pencewood Ct
Austin, TX 78750-3712

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

12/15/2014

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

Contributor address; City; State; Zip Code
5326 McCulloch Cir.
Houston, TX 77056

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)
Engineer

Employer (See Instructions)
Dannenbaum Engineering

Date

12/08/2014

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

Contributor address; City; State; Zip Code
1115 Wild Basin Ldg
West Lake Hills, TX 78746-2707

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)
People Pattern LLC

Date

12/12/2014

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

Contributor address; City; State; Zip Code
2601 Great Oaks Pkwy
Austin, TX 78756-2909

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

12/12/2014

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

Contributor address; City; State; Zip Code
1412 Barton Creek Blvd.
Austin, TX 78735

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: 4/14 Report: 7/27

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

12/14/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Curry, Michael6 Contributor address; City; State; Zip Code
700 Lavaca St
Ste 1400
Austin, TX 78701-31027 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

12/07/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Curtis, BrandonContributor address; City; State; Zip Code
14402 Sir Barton St
San Antonio, TX 78248-1145Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
HVAC RepairEmployer (See Instructions)
Self Employed

Date

12/07/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Curtis, StephanieContributor address; City; State; Zip Code
14402 Sir Barton St
San Antonio, TX 78248-1145Amount of
contribution (\$)

\$350.00

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

Date

12/15/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Dannenbaum, JamesContributor address; City; State; Zip Code
3100 W. Alabama St.
Houston, TX 77098Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
ChairmanEmployer (See Instructions)
Dannenbaum Engineering

Date

12/08/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Davis, GriffinContributor address; City; State; Zip Code
2604 Stratford Dr
Austin, TX 78746-4623Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
InvestorEmployer (See Instructions)
Q1Media

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 5/14 Report: 8/27

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

12/12/2014

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

6 Contributor address; City; State; Zip Code
25315 State Highway 71 W
Spicewood, TX 78669-2542

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

12/11/2014

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

Contributor address; City; State; Zip Code
301 Brazos St
Unit 1303
Austin, TX 78701-4629

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

12/13/2014

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

Contributor address; City; State; Zip Code
2500 Flora Cv
Austin, TX 78746-6902

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

12/12/2014

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

Contributor address; City; State; Zip Code
1402 Preston Ave
Austin, TX 78703-1902

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

12/11/2014

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

Contributor address; City; State; Zip Code
6618 Sitio Del Rio Blvd
Bldg C
Austin, TX 78730-1143

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)
Paralegal

Employer (See Instructions)
Law Offices of Vic Feazell

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 6/14 Report: 9/27

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

12/11/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Feazell, Vic6 Contributor address; City; State; Zip Code
6618 Sitio Del Rio Blvd
Bldg C
Austin, TX 78730-11437 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)
Attorney10 Employer (See Instructions)
Law Offices of Vic Feazell

Date

12/11/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Fox, DavidContributor address; City; State; Zip Code
7913 Mesa Trails Cir
Austin, TX 78731-1446Amount 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

12/09/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Hatch, TomContributor address; City; State; Zip Code
1102B E 8th St
Austin, TX 78702-3225Amount 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

12/08/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Hendler, ScottContributor address; City; State; Zip Code
1300 Alta Vista Ave
Austin, TX 78704-2515Amount 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

12/15/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Hill, RaeContributor address; City; State; Zip Code
2303 Windsor Rd
Austin, TX 78703-3116Amount of
contribution (\$)

\$350.00

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 7/14 Report: 10/27

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

12/15/2014

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

6 Contributor address; City; State; Zip Code
2303 Windsor Rd
Austin, TX 78703-3116

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)
Real Estate

10 Employer (See Instructions)
HPI

Date

12/08/2014

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

Contributor address; City; State; Zip Code
5321 Western Hills Dr
Austin, TX 78731-4852

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

12/09/2014

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

Contributor address; City; State; Zip Code
8709 Ridgehill Dr
Austin, TX 78759-7342

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

12/12/2014

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

Contributor address; City; State; Zip Code
PO Box 4903
Austin, TX 78765-4903

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)
Grocery Store

Employer (See Instructions)
Mini's Food Mart Inc.

Date

12/10/2014

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

Contributor address; City; State; Zip Code
111 Congress Ave
Ste 1400
Austin, TX 78701-4093

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)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 8/14 Report: 11/27

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

12/10/2014

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

Husch Blackwell, LLP

6 Contributor address; City; State; Zip Code

4801 Main St
Ste 1000
Kansas City, MO 64112-2551

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)

10 Employer (See Instructions)

Date

12/11/2014

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

Kerr, Chris

Contributor address; City; State; Zip Code

4115 Abingdon Dr
Garland, TX 75043-7251

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)
EVP

Employer (See Instructions)
Force Multiplier Solutions

Date

12/11/2014

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

Kerr, Heather

Contributor address; City; State; Zip Code

4115 Abingdon Dr
Garland, TX 75043-7251

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)
Homemaker

Employer (See Instructions)
none

Date

12/08/2014

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

Lambrecht, 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)
Planned Parenthood of Greater Texas

Date

12/07/2014

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

Larson, Dohn

Contributor address; City; State; Zip Code

1009 Ellingson Ln
Austin, TX 78751-4003

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)
Texas Classroom Teacher's Association

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 9/14 Report: 12/27

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

00000008

4 Date

12/07/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Lawrence, Deborah**6** Contributor address; City; State; Zip Code
12 E 92nd St
Apt 3
New York, NY 10128-0652**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)
Clinical Psychologist**10** Employer (See Instructions)
Fordham University

Date

12/11/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Leonard, LindaContributor address; City; State; Zip Code
7122 Royal Ln
Dallas, TX 75230-3608Amount of
contribution (\$)

\$350.00

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

12/11/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Leonard, RobertContributor address; City; State; Zip Code
7122 Royal Ln
Dallas, TX 75230-3608Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
ChairmanEmployer (See Instructions)
Force Multiplier Solutions, Inc.

Date

12/10/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Lewis, CarolynContributor address; City; State; Zip Code
101 Colorado St
Apt 3208
Austin, TX 78701-4306Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
ChairEmployer (See Instructions)
Lewco Interests

Date

12/10/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Lindelow, BrittContributor address; City; State; Zip Code
2502 Bridle Path
Austin, TX 78703-3212Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
Management ConsultantEmployer (See Instructions)
Self

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 10/14 Report: 13/27

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

12/07/2014

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

Loewy, Adam

6 Contributor address; City; State; Zip Code

111 Congress Ave
Ste 400
Austin, TX 78701-4143

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)
Lawyer

10 Employer (See Instructions)
Loewy Law Firm

Date

12/09/2014

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

Lorenz, Sheridan

Contributor address; City; State; Zip Code

3703 River Rd
Ste A
Austin, TX 78703-1036

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)
Hospitality Executive

Employer (See Instructions)
Mitchell Family Properties

Date

12/12/2014

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

MackKinnon, Richard

Contributor address; City; State; Zip Code

PO Box 4721
Austin, TX 78765-4721

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)
Marketing

Employer (See Instructions)
Less Networks

Date

12/08/2014

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

Naeve, Chuck

Contributor address; City; State; Zip Code

6507 Lost Cv
Austin, TX 78746-7128

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

12/11/2014

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

Oliver, Guy

Contributor address; City; State; Zip Code

1200 Verdant Way
Austin, TX 78746-6767

Amount of
contribution (\$)

\$300.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
General Manager

Employer (See Instructions)
V&S Enterprises

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 11/14 Report: 14/27

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

00000008

4 Date

12/07/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Oliver, Jason**6** Contributor address; City; State; Zip Code
3267 Bee Cave Rd
#107 & #92
Austin, TX 78746-6700**7** Amount of
contribution (\$)

\$300.00

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

Date

12/11/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Oliver, KerianneContributor address; City; State; Zip Code
1200 Verdant Way
Austin, TX 78746-6767Amount of
contribution (\$)

\$300.00

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

12/11/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Oliver, StacyContributor address; City; State; Zip Code
3267 Bee Cave Rd
#107 & #92
Austin, TX 78746-6700Amount of
contribution (\$)

\$300.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
OwnerEmployer (See Instructions)
V&S Enterprises

Date

12/11/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Oliver, VickiContributor address; City; State; Zip Code
3267 Bee Cave Rd
#107 & #92
Austin, TX 78746-6700Amount of
contribution (\$)

\$300.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
OwnerEmployer (See Instructions)
V&S Enterprises

Date

12/12/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Parken, EdwardContributor address; City; State; Zip Code
7917 W Rim Dr
Austin, TX 78731-1244Amount 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: 12/14 Report: 15/27

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

12/07/2014

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

6 Contributor address; City; State; Zip Code
PO Box 59164
Austin, TX 78763

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)
Broker

10 Employer (See Instructions)
SSG

Date

12/07/2014

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

Contributor address; City; State; Zip Code
4707 Crestway Dr
Austin, TX 78731-4712

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

12/12/2014

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)
University of Texas

Date

12/07/2014

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

Contributor address; City; State; Zip Code
PO Box 5674
Austin, TX 78763-5674

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

12/08/2014

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 (\$)

\$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)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 13/14 Report: 16/27

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

12/07/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Stuart, Donald6 Contributor address; City; State; Zip Code
4105 Long Champ Dr
Austin, TX 78746-11507 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

12/15/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Sullivan, DavidContributor address; City; State; Zip Code
1710 Waterston Ave
Austin, TX 78703-3937Amount 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

12/12/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Sullivan, MichaelContributor address; City; State; Zip Code
1613 W 9th 1/2 St
Austin, TX 78703-4711Amount of
contribution (\$)

\$350.00

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

Date

12/08/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Swan, LaurieContributor address; City; State; Zip Code
1611 Northwood Rd
Austin, TX 78703-1945Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
Real EstateEmployer (See Instructions)
Stratus Properties

Date

12/10/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Swartwood, AlisonContributor address; City; State; Zip Code
12604 Rush Creek Ln
Austin, TX 78732-1992Amount of
contribution (\$)

\$350.00

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 14/14 Report: 17/27

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

12/10/2014

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

6 Contributor address; City; State; Zip Code
12604 Rush Creek Ln
Austin, TX 78732-1992

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)
Marketing

10 Employer (See Instructions)
Force Multiplier

Date

12/09/2014

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

Contributor address; City; State; Zip Code
8911 N Cap Tx Hwy
Ste 2120
Austin, TX 78759-7200

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

12/07/2014

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

Contributor address; City; State; Zip Code
1206 W 8th St
Austin, TX 78703-5279

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 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: 1/10 Report: 18/27		2 FILER NAME Dealey, Amanda		3 ACCOUNT # (TEC filers) 00000008	
4 Date 12/08/2014	5 Payee name Austin's Pizza				
6 Amount (\$) \$87.11	7 Payee address City: State: Zip Code 1600 West 35th Street Austin, TX 78731				
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) <input type="checkbox"/> food for volunteers		
	<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 12/15/2014	Payee name Austin's Pizza				
Amount (\$) \$98.12	Payee address City: State: Zip Code 1600 West 35th Street Austin, TX 78731				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> food for volunteers		
	<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 12/16/2014	Payee name Bintliff, David				
Amount (\$) \$110.00	Payee address City: State: Zip Code 6303 Danwood Dr. Austin, TX 78759				
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"/> Contract labor		
	<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 12/18/2014	Payee name Cashiola, Tyler				
Amount (\$) \$1,428.00	Payee address City: State: Zip Code 817 Peggy St. Deer Park, TX 77536				
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"/> contract labor		
	<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: 2/10 Report: 19/27		2 FILER NAME Dealey, Amanda		3 ACCOUNT # (TEC filers) 00000008	
4 Date 12/11/2014	5 Payee name Central Market				
6 Amount (\$) \$23.94	7 Payee address City: State: Zip Code 4001 N Lamar Blvd. Austin, TX 78756				
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"/> food for event		
	<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 12/15/2014	Payee name Central Market				
Amount (\$) \$19.57	Payee address City: State: Zip Code 4001 N Lamar Blvd. Austin, TX 78756				
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 for event		
	<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 12/15/2014	Payee name Central Market				
Amount (\$) \$7.96	Payee address City: State: Zip Code 4001 N Lamar Blvd. Austin, TX 78756				
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 for event		
	<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 12/17/2014	Payee name Central Market				
Amount (\$) \$58.99	Payee address City: State: Zip Code 4001 N Lamar Blvd. Austin, TX 78756				
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 for event		
	<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: 3/10 Report: 20/27		2 FILER NAME Dealey, Amanda		3 ACCOUNT # (TEC filers) 00000008	
4 Date 12/29/2014	5 Payee name Clary, Anne				
6 Amount (\$) \$2,000.00	7 Payee address City: State: Zip Code 1510 Newning Austin, TX 78704				
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"/> 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 12/18/2014	Payee name Cooper, Lucy				
Amount (\$) \$1,182.00	Payee address City: State: Zip Code 8500 Red Willow #A Austin, TX 78736				
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"/> contract labor		
	<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 12/18/2014	Payee name Dunning, Logan				
Amount (\$) \$1,125.00	Payee address City: State: Zip Code 8519 Cahill Dr. # 2505 Austin, TX 78729				
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"/> contract labor		
	<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 12/11/2014	Payee name GNI Strategies, LLC				
Amount (\$) \$20,000.00	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) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing, postage & mailing services		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 4/10 Report: 21/27		2 FILER NAME Dealey, Amanda		3 ACCOUNT # (TEC filers) 00000008
4 Date 12/16/2014	5 Payee name GNI Strategies, LLC			
6 Amount (\$) \$4,700.00	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) Printing Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing, postage & mailing services	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 12/18/2014	Payee name Hardwick, Andrew			
Amount (\$) \$1,386.00	Payee address City; State; Zip Code 417 Canterbury New Braunfels, TX 78132			
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"/> 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 12/18/2014	Payee name Hardwick, Henry			
Amount (\$) \$1,260.00	Payee address City; State; Zip Code 2804 Rio Grande St. #203 Austin, TX 78705			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> contract labor	
	<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 12/16/2014	Payee name In Focus Campaigns			
Amount (\$) \$239.61	Payee address City; State; Zip Code PO Box 10726 Fort Worth, TX 76114			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Telephone calls	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 5/10 Report: 22/27		2 FILER NAME Dealey, Amanda		3 ACCOUNT # (TEC filers) 00000008	
4 Date 12/18/2014		5 Payee name Jacobson, Justin			
6 Amount (\$) \$1,254.00		7 Payee address City; State; Zip Code 1329 W. Mary St. #108 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"/> contract labor <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 12/16/2014		Payee name Littlefield Consulting			
Amount (\$) \$1,400.00		Payee address City; State; Zip Code PO Box 90591 Austin, TX 78709			
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	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/08/2014		Payee name Postmaster			
Amount (\$) \$44.10		Payee address City; State; Zip Code 3507 N. Lamar Blvd Austin, TX 78705			
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"/> postage <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 12/08/2014		Payee name Postmaster			
Amount (\$) \$44.10		Payee address City; State; Zip Code 3507 N. Lamar Blvd Austin, TX 78705			
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"/> postage <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: 6/10 Report: 23/27		2 FILER NAME Dealey, Amanda		3 ACCOUNT # (TEC filers) 00000008	
4 Date 12/08/2014	5 Payee name Postmaster				
6 Amount (\$) \$44.10	7 Payee address City: State: Zip Code 3507 N. Lamar Blvd Austin, TX 78705				
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"/> postage		
	<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 12/08/2014	Payee name Postmaster				
Amount (\$) \$1,960.00	Payee address City: State: Zip Code 3507 N. Lamar Blvd Austin, TX 78705				
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"/> postage		
	<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 12/08/2014	Payee name Postmaster				
Amount (\$) \$44.10	Payee address City: State: Zip Code 3507 N. Lamar Blvd Austin, TX 78705				
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"/> postage		
	<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 12/08/2014	Payee name Postmaster				
Amount (\$) \$44.10	Payee address City: State: Zip Code 3507 N. Lamar Blvd Austin, TX 78705				
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"/> postage		
	<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: 7/10 Report: 24/27		2 FILER NAME Dealey, Amanda		3 ACCOUNT # (TEC filers) 00000008	
4 Date 12/08/2014		5 Payee name Postmaster			
6 Amount (\$) \$44.10		7 Payee address City: State: Zip Code 3507 N. Lamar Blvd Austin, TX 78705			
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"/> postage <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 12/08/2014		Payee name Postmaster			
Amount (\$) \$44.10		Payee address City: State: Zip Code 3507 N. Lamar Blvd Austin, TX 78705			
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"/> postage <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 12/08/2014		Payee name Postmaster			
Amount (\$) \$44.10		Payee address City: State: Zip Code 3507 N. Lamar Blvd Austin, TX 78705			
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"/> postage <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 12/08/2014		Payee name Postmaster			
Amount (\$) \$44.10		Payee address City: State: Zip Code 3507 N. Lamar Blvd Austin, TX 78705			
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"/> postage <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 12/08/2014		Payee name Postmaster			
Amount (\$) \$44.10		Payee address City: State: Zip Code 3507 N. Lamar Blvd Austin, TX 78705			
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"/> postage <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: 8/10 Report: 25/27		2 FILER NAME Dealey, Amanda		3 ACCOUNT # (TEC filers) 00000008	
4 Date 12/09/2014	5 Payee name Postmaster				
6 Amount (\$) \$735.00	7 Payee address City: State: Zip Code 3507 N. Lamar Blvd Austin, TX 78705				
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"/> postage		
	<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 12/08/2014	Payee name Sargent, Sam				
Amount (\$) \$1,000.00	Payee address City: State: Zip Code 5516 Grover Ave. #103 Austin, TX 78756				
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				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 12/18/2014	Payee name Serna, Marilyn				
Amount (\$) \$1,416.00	Payee address City: State: Zip Code 10100 Ivanhoe Trail Austin, TX 78748				
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"/> contract labor		
	<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 12/18/2014	Payee name Steger, Mackenzie				
Amount (\$) \$414.00	Payee address City: State: Zip Code 350 North St. #1405A San Marcos, TX 78666				
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"/> contract labor		
	<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
FeesGifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing ExpenseSalaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental ExpenseLoan 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: 9/10 Report: 26/27		2 FILER NAME Dealey, Amanda		3 ACCOUNT # (TEC filers) 00000008	
4 Date 12/18/2014		5 Payee name Truong, Lauri			
6 Amount (\$) \$1,134.00		7 Payee address City: State: Zip Code 16713 Dorman Dr. Round Rock, TX 78681			
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"/> contact labor <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 12/15/2014		Payee name Tyson's Tacos			
Amount (\$) \$91.37		Payee address City: State: Zip Code 4905 Airport Boulevard Austin, TX 78751			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> food for event <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 12/17/2014		Payee name Tyson's Tacos			
Amount (\$) \$51.32		Payee address City: State: Zip Code 4905 Airport Boulevard Austin, TX 78751			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> food for event <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 12/18/2014		Payee name Ukawoko, Amaka			
Amount (\$) \$1,632.00		Payee address City: State: Zip Code 1300 Crossing Place #2432 Austin, TX 78741			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> contract labor <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: 10/10 Report: 27/27		2 FILER NAME Dealey, Amanda		3 ACCOUNT # (TEC filers) 00000008	
4 Date 12/18/2014		5 Payee name Wallace, John			
6 Amount (\$) \$1,452.00		7 Payee address City; State; Zip Code 11316 Jollyville Rd. Austin, TX 78759			
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"/> contract labor <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 12/16/2014		Payee name Worley Printing Co.			
Amount (\$) \$1,745.53		Payee address City; State; Zip Code 3217 North IH 35 Austin, TX 78722 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:	

BUNDLING REPORT

Name of candidate/officeholder: Mandy Dealey

1. For each person/bundler who has solicited and obtained campaign contributions on your behalf of \$200 or more per person from five (5) or more individuals during the reporting period, provide the following information. (This requirement does not apply to an individual who raises funds in total amount of \$5,000 or less for a candidate through a fundraising event held at the individual's residence.)

Name of Individual/Bundler	Address	Occupation	Employer	Total Amount Bundled
Slater Swartwood	12604 Rush Creek Ln Austin, TX 78732	Marketing	Force Multiplier	\$2,100
Nikelle Meade	5363 Austral Loop Austin, TX 78739	Partner	Husch Blackwell LLP	\$1,500
Jerry Harris	111 Congress Ave Suite 1400 Austin, TX 78701	Partner	Husch Blackwell LLP	\$1,775

2. For each person identified above, enter the name and address of each individual contributor whose contribution was bundled by that individual. Attach additional sheets if necessary.

Name of Contributor	Address	Occupation	Employer	Contribution Amount	Bundler
Slater Swartwood	12604 Rush Creek Ln Austin, TX 78732	Marketing	Force Multiplier Solutions, Inc.	\$350	Slater Swartwood
Alison Swartwood	12604 Rush Creek Ln Austin, TX 78732	Homemaker	N/A	\$350	Slater Swartwood
Robert Leondard	7122 Royal Ln Dallas, TX 75230	Chairman	Force Multiplier Solutions, Inc.	\$350	Slater Swartwood
Linda Leondard	7122 Royal Ln Dallas, TX 75230	Homemaker	N/A	\$350	Slater Swartwood
Chris Kerr	4115 Abingdon Dr Garland, TX 75043	EVP	Force Multiplier Solutions, Inc.	\$350	Slater Swartwood
Heather Kerr	4115 Abingdon Dr Garland, TX 75043	Homemaker	N/A	\$350	Slater Swartwood
Jason Oliver	3267 Bee Cave Rd #107 & #92 Austin, TX 78746	Land Manager	V&S Enterprises	\$300	Nikelle Meade
Stacy Oliver	3267 Bee Cave Rd #107 & #92 Austin, TX 78746	Owner	V&S Enterprises	\$300	Nikelle Meade
Vicki Oliver	3267 Bee Cave Rd #107 & #92 Austin, TX 78746	Owner	V&S Enterprises	\$300	Nikelle Meade

Kerianne Oliver	1200 Verdant Way Austin, TX 78746	Homemaker	N/A	\$300	Nikelle Meade
Guy Oliver	1200 Verdant Way Austin, TX 78746	General Manager	V&S Enterprises	\$300	Nikelle Meade
Brandon Curtis	14402 Sir Barton St San Antonio, TX 78248	HVAC Repair	Self Employed	\$350	Jerry Harris
Stephanie Curtis	14402 Sir Barton St San Antonio, TX 78248	Teacher	NEISD	\$350	Jerry Harris
Dohn Larson	1009 Ellingson Ln Austin, TX 78751	Attorney	Texas Classroom Teacher's Association	\$350	Jerry Harris
Husch Blackwell State PAC				\$350	Jerry Harris
Husch Blackwell, LLP				\$350	Jerry Harris
Alexandra Jashinsky	5001 Bent Creek Ct El Dorado Hills, CA 95762	Associate	Husch Blackwell LLP	\$25	Jerry Harris

- [illegible]

*Note: It is important to remember that contributions to you are from the **actual donor**, **not** from the individual who solicited the donations on your behalf. Therefore, on form C/OH you must identify the actual donor as the contributor.*

STATE OF TEXAS
VERIFICATION

I certify that the total amount bundled on my behalf in the campaign period by all partners, shareholders, principals, employees, and persons who conduct business through a business association that is subject to City Code, Section 2-2-22(E), when added together, does not exceed ten (10) times the contribution limit set by City Charter, Article III, Section 8(A)(1) for the entire business association.

Signature of Affiant

BANK RECONCILIATION

A candidate, officeholder, or campaign committee filing a January 15 year-end contribution and expenditure report shall provide the following information for the previous calendar year.

Name of candidate, officeholder or campaign committee: Amanda Dealey

For each checking, savings or other financial institution account maintained during 2014__, enter the following information indicated. For each additional institution, use a copy of this schedule.

The name of the financial institution: Frost Bank

Type of account: Checking

The beginning balance: \$0

The ending balance: \$4,415.40

Enter the following information for checks issued on that account that have not cleared by December 31:

Date	Payee	Amount
12-29-214	Anne Clary	\$2000
12-16-14	Littlefield Consulting	\$1400
12-18-14	Lucy Cooper	\$1162
12-18-14	John Wallace	\$1452
11-14-14	John Wallace	\$282
9-30-14	Andrew Hardwick	\$86.63
10-16-14	Andrew Hardwick	\$360

Enter the following information for checks received as contributions and deposited but dishonored by the contributor's financial institution:

Date of receipt	Contributor	Amount

Amount of interest or dividends earned: _____

All deposits and withdrawals not disclosed on a filed contribution and expenditure report:

Date of deposit or withdrawal	Amount of deposit	Amount of withdrawal
Various dates	\$1.09 bank interest	
5-6-14	.32 Gvalidate test deposit for bank service	

A listing of all checks received by December 31 but not deposited into any account (whether or not the checks have been "accepted" within the definition of the Texas Election Code):

Date of receipt	Contributor	Amount
12/7/14	Alfred Stanley	\$100
12/7/14	William Apt	\$100