		E / OFFICEHO FINANCE RE				COVE	FORM C/ R SHEET P	
TL	o C/OH Instruction C	uide explains how to co	molete this form	1 Filer ID		2 Total pag	es filed:	
ın	e Clori instruction G	dide explains now to co	implete this form.				12	
3	CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR	FIRST Amanda		МІ	OFFI	CE USE ONL	Y
	· · -							
		NICKNAME	LAST Dealey		SUFFIX	(
4	CANDIDATE /	ADDRESS / PO BOX;	APT / SUITE #;	CITY;	ZIP COI	DE Date Hand-deliv	rered or Date Postmark	ed
	OFFICEHOLDER MAILING ADDRESS	5401 Ridge Oak Dr.				Receipt #	Amount	
	Change of Address	Austin, TX 78731				Date Processed		Ã
						<u> </u>	<u> </u>	S I
						Date Imaged	ا سر	NETIN CITY
5	CAMPAIGN	MS/MRS/MR	FIRST	-	MI	<u>N</u>		T
	TREASURER NAME		Gary				PM 1	IAED LA CLE
		NICKNAME	LAST		SUFFIX		~	굦
			Valdez				26	•
6	CAMPAIGN	STREET ADDRESS (NO	O PO BOX PLEASE		APT / SUITE #;	CITY;	STATE; ZII	CODE
	TREASURER ADDRESS	PO Box 68500		-77				
	(Residence or Business)	Austin, TX 787	'68					
ļ-	CAMPAIGN	AREA CODE F	HONE NUMBER	EXTENSION	<u> </u>			
	TREASURER PHONE		37-5473					
8	REPORT TYPE	January 15	30th day be	efore election	Runoff	15th day at appointme	fter campaign treas nt (officeholder only	urer)
		X July 15	8th day bel	lore election	Exceeded \$500 limi		rt (Atlach C/OH-FR	
9	PERIOD	, ,	ear			Day Year		
	COVERED	01/01/2015		THROUGH	06/30	0/2015		
10	ELECTION	ELECTION DAT	l <u>–</u>		ELECTION TY			
		Month Day Y	ear	Primary	Runoff	Other		
				General	Special			
11	OFFICE	OFFICE HELD (if any)			12 OFFICE SO	JGHT (if known)	· · · · · ·	
					. <u></u>		-	
			G	O TO PAGE	2			
Fo	rms provided by Te	xas Ethics Commission	n www	v.ethics.state	tx.us		Version V	1.0.28282

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

5011511	a 1017120				2 of 12
13 C / OH NAME	Dealey, Amanda	1	L4 Filer ID		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted or political expenditure These expenditures may have been made without th officeholders are required to report this information	e candidate's or officeh	nolder's kno	wledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL	COMMITTEE ADDRESS			. —
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRESS	5		
		**10101010101			·
16 CONTRIBUTION TOTALS	1. TOTAL POLITIC LOANS, OR GU	AL CONTRIBUTIONS OF \$50 OR LESS (OTHER TI ARANTEES OF LOANS), UNLESS ITEMIZED	HAN PLEDGES,	\$	0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS)	· !	\$	0.00
EXPENDITURE TOTALS	3. TOTAL POLITIC	AL EXPENDITURES OF \$100 OR LESS, UNLESS I	TEMIZED	\$	48.70
	4. TOTAL POLITIC	AL EXPENDITURES		\$	6,065.04
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LA RIOD	ST DAY OF THE	\$	538.39
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS O	OF THE LAST DAY	\$	37,950.00
17 AFFADAVIT		l swear, or affirm, under penalty true and correct and includes all under Title 15, Election Code.	of perjury, that the acci	ompanying be reporte	report is d by me
	SUSAN C. HAR Notary Public, State My Commission E May 16, 201	of Texas xpires 5	Candidate or Officehold	der	
	orany STAMP / SEAL AB scribed before me, by the s	Anna da Dedi	this the	<u>b</u>	day
Signaturevoroff) ficer administering	Printed name of officer administering	Title of officer	administer	ng oath

FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 3 of 12 18 FILER NAME 19 Filer ID Dealey, Amanda 20 SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE \$ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ SCHEDULE B: PLEDGED CONTRIBUTIONS \$ \$ 2.850.00 Х SCHEDULE E: LOANS 6,065.04 SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ Х SCHEDULE F2: UNPAID INCURRED OBLIGATIONS SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ 7. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 10. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 3,226.66 \$ 11. X **TO FILER**

LOANS					SCHEDULE E
The Instructio	n Guide explains how to com	nplete this f	orm.		ges Schedule E: 1 Rpt: 4/12
PILER NAME Dealey, Amanda	ı		-	3 Filer ID	
TOTAL OF UN	IITEMIZED LOANS	**	-		\$
Date of loan 01/13/2015	7 Name of lender Dealey, Amanda	out-of-state PA	C (ID#:		9 Loan Amount (\$) \$2,850.00
Is lender a financial institution? No	8 Lender address; City; 5401 Ridge Oak Dr. Austin, TX 78731	State;	Zip Code		10 Interest Rate 11 Maturity Date
2 Principal occupation retired	on / Job title (See Instructions)		13 Employer (See Instru none	ctions)	
L4 Description of Col	ateral		15 Check if personal fun	ds were deposited	l into political account (See Instructions)
L6 GUARANTOR INFORMATION X not applicable	17 Name of guarantor 18 Guarantor address; City;		Zip Code		19 Amount Guaranteed (\$)
O Principal occupati	 on		21 Employer (See Instru	ictions)	
	Texas Ethics Commission	galasi nahit	cs.state.tx.us		Version V1.0.28

Forms provided by Texas Ethics Commission

SCHEDULE F1

Advertising Expense

Event Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement

Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political	Committee Legal Services	Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wagns/Contract Labor	Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	The Instruction Guide explains h	now to complete this form.	
1 Total pages Schedule F1: Sch: 1/7 Rpt: 5/12	2 FILER NAME Dealey, Amanda		3 Filer ID
4 Date 01/07/2015	5 Payee name Cooper, Lucy	·	
		Zip Code	
	Austin, TX 78736		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this school Salaries/Wages/Contract Labor	Check il travel	outside of Texas. Complete Schedule T. 1, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF		Office sought	Office held
Date	Payee name		
01/02/2015	Facebook, Inc.		
Amount (\$)	Payee address; City; State;	Zip Code	
\$180.64	1601 Willow Road		
	• :		
	Menlo Park, CA 94025	· · · · · · · · · · · · · · · · · · ·	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sch Advertising Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense al advertising
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Office sought	Office held
Date 01/05/2015	Payee name First Data		
Amount (\$) \$50.40	Payee address; City; State 5565 Glenridge Connector NE	; Zip Code	·
, 	Atlanta, GA 30342		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sch Accounting/Banking	Check it travel	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense COUNT processing fees
Complete ONLY if direct expenditure to benefit C/O		Office sought	Office held

SCHEDULE F1

Advertising Expense

Event Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement

Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political	
	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1: Sch: 2/7 Rpt: 6/12	2 FILER NAME Dealey, Amanda
4 Date 01/05/2015	5 Payee name First Data
6 Amount (\$) \$453.76	7 Payee address; City; State; Zip Code 5565 Glenridge Connector NE
	Atlanta, GA 30342
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense merchant account processing fees
Complete <u>ONLY</u> if direct expenditure to benefit C/Or	Candidate/Officeholder name Office sought Office held
Date 01/05/2015	Payee name First Data
Amount (\$) \$1,290.78	Payee address; City; State; Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Auslin, TX, officeholder living expense merchant account processing fees
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date 02/03/2015	Payee name First Data
Amount (\$) \$15.00	Payee address; City; State; Zip Code 5565 Glenridge Connector NE
· · · · · · · · · · · · · · · · · · ·	Atlanta, GA 30342
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin. TX, officeholder living expense merchant account processing fees
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Event Expense

Loan Repayment/Reimbursement

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political		Fees Food/Beverage Expense Gitt/Awards/Memorials Expense Legal Services	Polling Expens Printing Expens		Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a calegory not listed above)
			The Instruction Guide explain	s how to compl	ete this form.	
1	Total pages Schedule F1:	2 FILER NAM	Ē			3 Filer ID
	Sch: 3/7 Rpt: 7/12	Dealey, Ar	nanda			<u>,</u>
4	Date	5 Payee name				
	02/03/2015	First Data				
6	Amount (\$)	7 Payee addre	ess; City; Sta	te; Zip Code		
	\$587.63	5565 Glen	ridge Connector NE			
	•	Atlanta, G	A 30342			
8	PURPOSE	(a) Category 4	See Categories listed at the top of this s	rehedule) (b)	Description	
_	OF	Accounting	,	sonetions)	•	outside of Texas. Complete Schedule T.
	EXPENDITURE		,		_	, TX, officeholder living expense
	,				merchant acc	count processing fees
		_				
9	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office sought		Office held
F	Date	Pavee name				
	01/07/2015	Frost Bank				
-	Amount (\$)	Payee addr	ess; City; Sta	te; Zip Code		
	\$33.00	401 Congr	ess Ave.			
		Austin, TX	78701		·	
	PURPOSE	(a) Category (See Categories listed at the top of this	schedule) (b)	Description	
	OF EXPENDITURE	Accounting	g/Banking	İ		outside of Texas, Complete Schedule T. n, TX, officeholder living expense
				ļ	bank fee	, 17, Unicational waring expense
					Dann 100	•
-	Complete ONLY if direct	Candidate/O	fficeholder name	Office sought		Office held
	expenditure to benefit C/O			Omeo coog		
⊨	Data		<u> </u>		-	
	Date 01/08/2015	Payee nam Frost Bani	•			
L				ite; Zip Code		
l	Amount (\$)	Payee addr	•	ite, zip Code		
l	\$60.00	401 Congi	C55 AVC.			
		Austin, TX	78701			
┢	PURPOSE	(a) Category	See Categories listed at the top of this	schedule) (b)	Description	
	OF EXPENDITION	Accountin	· · · · · · · · · · · · · · · · · · ·	·	Check if travel	outside of Toxas, Complete Schedule T.
	EXPENDITURE		- -		ш	n, TX, officeholder living expense
					bank fee	
L						
	Complete ONLY if direct		fficeholder name	Office sought		Office held
	expenditure to benefit C/O	n 				
ı						\(\(\alpha\) \(\alpha\) \(\alpha\

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political		Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Office Overhead Polling Expense Printing Expens Salaries/Wages	i/Rental Expense : e	Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
			The Instruction Guide expl	ains how to comple	te this form.	
1	Total pages Schedule F1:	2 FILER	NAME		3	Filer ID
	Sch: 4/7 Rpt: 8/12	Deale	, Amanda			
4	Date	5 Payee	name			
	01/22/2015	Frost I	3ank ·			
6	Amount (\$)	7 Payee	address; City; S	tate; Zìp Code		
	\$5.00	401 C	ongress Ave.			
	·					
		Austin	, TX 78701			
8	PURPOSE	(a) Catego	ITY (See Categories listed at the top of the	is schedule) (b)	Description	
	OF EXPENDITURE		nting/Banking	1	<u></u>	side of Texas. Complete Schedule T.
	EXI CITE ONE				bank fee	X, officeholder living expense
			•		SUM TOO	•
9	Complete QNLY if direct	Candida	te/Officeholder name	Office sought		Office held
3	expenditure to benefit C/O		actomocholoci name	emos sought		
_	Date	Paves	name			
	02/20/2015	Payee Frost				
				tate; Zip Code		
	Amount (\$) \$5.00	· ·	ongress Ave.	<u> </u>		
	Ψ5.00	,,,,,				
		Austin	ı, TX 78701			
-	PURPOSE	-	OTY (See Categories listed at the top of the	is schedule) (b)	Description	
	OF		nting/Banking	ns scriedule)		tside of Texas, Complete Schedule T.
	EXPENDITURE				<u></u>	X, officeholder living expense
					bank fee	
				045-2	· 	Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		ite/Officeholder name	Office sought		Office field
-		<u> </u>			<u>-</u>	
	Date	Payee				
_	03/19/2015	Frost			- · <u>-</u> · · <u>-</u> · · ·	
	Amount (\$)	I		State; Zip Code		
	\$5.00	401 C	ongress Ave.			
	•					
	<u> </u>	Austir	n, TX 78701			
	PURPOSE		OFY (See Categories listed at the top of the	nis schedule) (b)	Description	utside of Toyas, Complete Schoolide T
	OF EXPENDITURE	Accou	ınting/Banking			itside of Texas. Complete Schedule T. FX, olficeholder living expense
					bank fee	
_	Complete ONLY if direct	Candida	ate/Officeholder name	Office sought		Office held
	expenditure to benefit C/O			•		
_	 			<u>.,,,</u>		-
	•					

SCHEDULE F1

Advertising Expense

Event-Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement

Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political		Polling Expense Printing Expense Salaries/Wages/Contract Labor	Travel Out of District OTHER (enter a category not listed above)
<u> </u>	The Instruction Guide explains	how to complete this form.	
Total pages Schedule F1:	2 FILER NAME		3 Filer ID
Sch: 5/7 Rpt: 9/12	Dealey, Amanda		
Date	5 Payee name		
04/20/2015	Frost Bank		
Amount (\$)	7 Payee address; City; State	; Zip Code	· · · · · · · · · · · · · · · · · · ·
\$5.00	401 Congress Ave.	,	
40.00	401 0011g1c357.1.c.		
· · · · · ·	A.unin TV 70704		
	Austin, TX 78701		
PURPOSE OF	(a) Category (See Categories listed at the top of this sol		outside of Texas. Complete Schedule T.
EXPENDITURE	Accounting/Banking	1 🖳	n, TX, officeholder living expense
		bank fee	,,
Complete ONE V it divers	Candidate/Officeholder name	Office sought	Office held
 Complete ONLY if direct expenditure to benefit C/OF 			Office weld
Date	Payee name		
05/20/2015	Frost Bank		
Amount (\$)	Payee address; City; State	e; Zip Code	
\$5.00	401 Congress Ave.		
	Austin, TX 78701		
PURPOSE		(b) Description	
OF	(a) Category (See Calegories listed at the top of this so Accounting/Banking		outside of Texas, Complete Schedule T,
EXPENDITURE	Accounting/Danking	Check if Austi	n, TX, officeholder living expense
		bank fee	
Complete ONLY if direct	Candidate/Officeholder name	Office sought	Office held
expenditure to benefit C/O	H		
Date	Payee name		
06/18/2015	Frost Bank		
		n: Zin Codo	
Amount (\$)	· ·	e; Zip Code	
\$5.00	401 Congress Ave.		
•	Austin, TX 78701		
PURPOSE	(a) Category (See Categories listed at the top of this so		
OF EXPENDITURE	Accounting/Banking		I outside of Texas. Complete Schedule T.
EXPENDITURE		bank fee	n, TX, officeholder living expense
		Dank lee	
	<u> </u>		**************************************
Complete ONLY if direct expenditure to benefit C/O	==: =: =: :: :	Office sought	Office held
experioliture to benefit C/O	<u>,</u>		

POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1 CONTRIBUTIONS **EXPENDITURE CATEGORIES FOR BOX 8(a)** Eveni Expense Advertising Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Accounting/Banking Fees Food/Beverage Expense Gift/Awards/Memorials Expense Consulting Expense Polling Expense Travel in District Printing Expense Travel Out of District Contributions/ Donations Made By -Legal Services OTHER (enter a category not listed above) Candidate/Officeholder/Political Committee Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form. 3 Filer ID 1 Total pages Schedule F1: FILER NAME 2 Sch: 6/7 Rpt: 10/12 Dealey, Amanda 4 Date Payee name 01/09/2015 Frost Bank Payee address; State; Zip Code 6 Amount (\$) City; \$33.00 401 Congress Ave. Austin, TX 78701 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Accounting/Banking EXPENDITURE Check if Austin, TX, officeholder living expense bank fee Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 01/13/2015 In Focus Campaigns Payee address; State; Zip Code City; Amount (\$) \$226.14 PO Box 10726 Fort Worth, TX 76114 (b) Description **PURPOSE** (a) Category (Sec Categories listed at the top of this schedule) OF Check if travel outside of Texas, Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Telephone calls Office held Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Date Payee name 01/02/2015 NGP Van, Inc. State; Zip Code Amount (\$) Payee address; City; 1101 15th Street, NW, Suite 500 \$320.00 Washington, DC 20005 (b) Description **PURPOSE** (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense database software Office sought Office held Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Sohotation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Candidate/Officeholder/Politica	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
_	T	
1	Total pages Schedule F1:	
	Sch: 7/7 Rpt: 11/12	Dealey, Amanda
4	Date	5 Payee name
	04/21/2015	Susan Harry Consulting, LLC
6	Amount (S)	7 Payee address; City; State; Zip Code
	\$121.99	P.O. Box 301074
		Austin, TX 78703
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITION	Consulting Expense Check if travel outside of Texas, Complete Schodule T.
	EXPENDITURE	Check if Ausiin. TX, officeholder living expense
		bookkeeping
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	01/07/2015	Wallace, John
┢	Amount (\$)	Payee address; City; State; Zip Code
	\$1,452.00	11316 Jollyville Rd.
1		
		Austin, TX 78759
⊢	PURPOSE	(a) Category (See Categories listed at the top of this schodule) (b) Description
	OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
ĺ	EXPENDITURE	Check if Austin, TX, officeholder living expense
l		contract labor
l		
Γ	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/O	п
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INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 12/12 3 Filer ID 2 FILER NAME Dealey, Amanda 8 Amount (\$) 4 Date 5 Name of person from whom amount is received \$0.03 01/22/2015 Frost Bank 6 Address of person from whom amount is received; City; State; Zip Code 401 Congress Ave. Austin, TX 78701 7 Purpose for which amount is received Check if political contribution returned to filer interest Amount (\$) Name of person from whom amount is received Date \$2,780.00 01/06/2015 **Griffith Properties** Address of person from whom amount is received; City; State; Zip Code 3536 Bee Cave Rd #310 Austin, TX 78746 Check if political contribution returned to filer Purpose for which amount is received rent deposit return Amount (\$) Name of person from whom amount is received Date \$360.00 06/30/2015 Hardwick, Andrew Address of person from whom amount is received; City; State; Zip Code 417 Canterberry New Braunfels, TX 78132 Purpose for which amount is received Check if political contribution returned to filer uncashed paycheck (voided) Amount (\$) Name of person from whom amount is received Date \$86.63 06/30/2015 Hardwick, Andrew Address of person from whom amount is received; City; State; Zip Code 417 Canterberry New Braunfels, TX 78132 Check if political contribution returned to filer Purpose for which amount is received uncashed paycheck (voided)