

FORM C/OH
COVER SHEET PG 1

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**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS****FORM C/OH
COVER SHEET PG 2****13 C/OH NAME** Zimmerman, Donald (Mr.)**14 ACCOUNT #** (Ethics Commission filers)
00000006**15 NOTICE
FROM
POLITICAL
COMMITTEE(S)**

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

COMMITTEE TYPE**COMMITTEE NAME**☐ **GENERAL****COMMITTEE ADDRESS**☐ **SPECIFIC****COMMITTEE CAMPAIGN TREASURER NAME**☐ additional pages**COMMITTEE CAMPAIGN TREASURER ADDRESS****16 CONTRIBUTION
TOTALS**

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 10.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 638.50

**EXPENDITURE
TOTALS**

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$ 0.00

4. TOTAL POLITICAL EXPENDITURES

\$ 1,208.96

**CONTRIBUTION
BALANCE**

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 1,292.12

**OUTSTANDING
LOAN TOTALS**

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 18,000.00

17 AFFIDAVIT

AFFIX NOTARY SEAL ABOVE

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.

DS Zimmerman

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Donald Zimmerman, this the 10 day of July, 20 15, to certify which, witness my hand and seal of office.OT

Signature of officer administering oath

Okairi Torres

Print name of officer administering oath

Notary Public

Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 1/1 Report: 3/6

2 FILER NAME Zimmerman, Donald (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00000006

4 Date

04/13/2015

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Barr, Alan (Mr.)

6 Contributor address; City; State; Zip Code
7706 Stonewood Dr.
Austin, TX 78731

7 Amount of
contribution (\$)

\$50.00

8 In-kind contribution
description (if applicable)
NOTE: Legal Defense
Contr.

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

9 Principal occupation / Job title (See Instructions)
Architect

10 Employer (See Instructions)
Self

Date

03/21/2015

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

Contributor address; City; State; Zip Code
5714 Merrywing Cir.
Austin, TX 78730

Amount of
contribution (\$)

\$500.00

In-kind contribution
description (if applicable)
NOTE: Legal Defense
Contr.

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

Principal occupation / Job title (See Instructions)
Businessman

Employer (See Instructions)
Self

Date

02/17/2015

Full name of contributor ☐ out-of-state PAC (ID# _____)
Gleinser, Tom (Mr.)

Contributor address; City; State; Zip Code
32635 RR 12
Dripping Springs, TX 78620

Amount of
contribution (\$)

\$60.00

In-kind contribution
description (if applicable)
NOTE: Legal Defense

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

Principal occupation / Job title (See Instructions)
Engineer

Employer (See Instructions)
ATEX Engineering

Date

06/23/2015

Full name of contributor ☐ out-of-state PAC (ID# _____)
Zimmerman, Don (Mr.)

Contributor address; City; State; Zip Code
10901 Enchanted Rock Cv
Austin, TX 78726

Amount of
contribution (\$)

\$18.50

In-kind contribution
description (if applicable)
Paper, Envelopes, Ink
for Legal Defense
Fundraiser mailout

(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: 1/1 Report: 4/6		2 FILER NAME Zimmerman, Donald (Mr.)		3 ACCOUNT # (TEC filers) 00000006	
4 Date 03/19/2015	5 Payee name Austin Crossing LTD.				
6 Amount (\$) \$500.00	7 Payee address City: State: Zip Code 405 N. Lamar Ste. 200 Austin, TX 78703				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Remainder of electric bills Q4 2014 <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 03/19/2015	Payee name Peterson, Reagan (Mr.)				
Amount (\$) \$100.00	Payee address City: State: Zip Code 115 Remington Dr Kyle, TX 78640				
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"/> Campaign victory party video <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 06/30/2015	Payee name Pirya				
Amount (\$) \$10.96	Payee address City: State: Zip Code 144 2nd St., First Floor San Francisco, CA 94105				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fundraising CC fees <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 06/09/2015	Payee name Stephen Casey Law Firm				
Amount (\$) \$500.00	Payee address City: State: Zip Code 595 Round Rock West Dr Ste 102 Round Rock, TX 78681				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Legal Services		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consulting <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

**POLITICAL EXPENDITURES
MADE FROM PERSONAL FUNDS****SCHEDULE G****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: 1/1 Report: 5/6		2 FILER NAME Zimmerman, Donald (Mr.)	3 ACCOUNT # (TEC filers) 00000006
4 Date 06/23/2015	5 Payee name Zimmerman, Don (Mr.)		
6 Amount (\$) \$98.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address City: State: Zip Code 10901 Enchanted Rock Austin, TX 78726		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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		

**NON-POLITICAL EXPENDITURES
MADE FROM POLITICAL CONTRIBUTIONS****SCHEDULE I**

The Instruction Guide explains how to complete this form.

1 PAGE # Schedule: 1/1 Report: 6/6		2 FILER NAME Zimmerman, Donald (Mr.)		3 ACCOUNT # (TEC filers) 00000006
4 Date 01/07/2015	5 Payee name Wells Fargo Bank			
6 Amount (\$) \$9.00	7 Payee address City: State: Zip Code 10401 Anderson Mill Rd. Austin, TX 78750			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description (See instructions regarding type of information required.) Banking Transaction	