

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1 Filer ID (Ethics Commission Filers)		2 Total pages filed: 27		OFFICE USE ONLY			
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	Date Received 2016 NOV 2 PM 3 AUSTIN CITY CLERK RECEIVED			
	NICKNAME	LAST	SUFFIX				
4 ORIGINAL REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other (specify)	Date Hand-delivered or Date Postmarked Receipt # Amount \$			
	<input type="checkbox"/> July 15	<input type="checkbox"/> Exceeded \$500 limit					
	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> 15th day after treasurer appointment (officeholder only)					
	<input checked="" type="checkbox"/> 8th day before election	<input type="checkbox"/> Final report					
5 ORIGINAL PERIOD COVERED	Month	Day	Year	Month	Day	Year	
	09	30	2016	THROUGH	10	29	2016

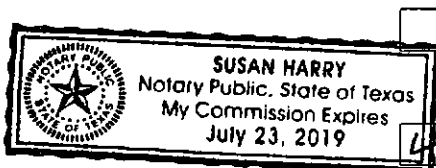
6 EXPLANATION OF CORRECTION

We have just received a notice of expenditure that was mailed to the campaign PO Box but not received prior to filing the original report. This report includes that notice.

7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check ONLY if applicable:



Semiannual reports: I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Pelia Garza, this the 2nd day of November 2016, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

**Remember To Attach Any Part Of The Campaign Finance Report Form
Needed To Report And Explain Corrections**

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID	2 Total pages filed: 24
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Delia	OFFICE USE ONLY Date Received .. . Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged	
	NICKNAME LAST SUFFIX Garza		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE Post Office Box 111 Austin, TX 78767		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Martha		
	NICKNAME LAST SUFFIX Cotera		
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1502 Norris Dr. Austin, TX 78704		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 444-7595		
8 REPORT TYPE	<input 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 checked="" 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 Month Day Year 09/30/2016 THROUGH 10/29/2016		
10 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other 11/08/2016 <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any) Austin City Council District 2		12 OFFICE SOUGHT (if known) Austin City Council District 2

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME Garza, Delia		14 Filer ID	
15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> 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 Board of Reators PAC	
		COMMITTEE ADDRESS 4800 Spicewood Springs Rd. Austin, TX 78759	
		COMMITTEE CAMPAIGN TREASURER NAME Emily, Chenevert	
		COMMITTEE CAMPAIGN TREASURER ADDRESS 4800 Spicewood Springs Rd. Austin, TX 78759	
16 CONTRIBUTION TOTALS	1.	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 35.00
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 12,309.00
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 554.57
	4.	TOTAL POLITICAL EXPENDITURES	\$ 16,597.71
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 21,709.06
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 100.00

17 AFFADAVIT

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 of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Delia Garza, this the 2nd day of November 2016, to certify which, witness my hand and seal of office.

Signature of officer administering

Printed name of officer administering

Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

3 of 24

18 FILER NAME Garza, Delia		19 Filer ID
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 11,970.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 339.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$.
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$.
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 16,597.71
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$.
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$.
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$.
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$.
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$.
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$.
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/11 Rpt: 4/24
2 FILER NAME Garza, Delia		3 Filer ID
4 Date 10/17/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ammons, Nicholes <hr/> 6 Contributor address; City; State; Zip Code 403 N Pleasant Valley Rd Austin, TX 78702-4838	7 Amount of Contribution (\$) \$350.00
8 Principal occupation / Job title (See Instructions) Partner		9 Employer (See Instructions) Trubox Products
Date 10/11/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin Board of Realtors PAC <hr/> Contributor address; City; State; Zip Code 4106 Medical Pkwy Austin, TX 78756-3722	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/18/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Black Swan Yoga <hr/> Contributor address; City; State; Zip Code 4401 Freidrich Ln Ste 302 Austin, TX 78744-1852	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/22/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blizzard, Mike <hr/> Contributor address; City; State; Zip Code 2100 Southern Oaks Austin, TX 78745	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/30/2016	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C30001556</u>) CWA COPE-PCC <hr/> Contributor address; City; State; Zip Code 501 3rd St NW Washington, DC 20001-2797	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/11 Rpt: 5/24
2 FILER NAME Garza, Delia		3 Filer ID
4 Date 10/22/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carrasco, Lizette 6 Contributor address; City; State; Zip Code 1112 West 9th Austin, TX 78703	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/09/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cavazos, Perla Contributor address; City; State; Zip Code 1108 Fiesta St Austin, TX 78702-3011	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/28/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Griffin Contributor address; City; State; Zip Code 2604 Stratford Drive Austin, TX 78746	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Public relations		Employer (See Instructions) Self
Date 10/28/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeFrates, Ana Contributor address; City; State; Zip Code 2011 Garden St Austin, TX 78702	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/25/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drenner, Steve Contributor address; City; State; Zip Code 3209 Crosswind Dr Spicewood, TX 78669-5130	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/11 Rpt: 6/24 ** .
2 FILER NAME Garza, Delia		3 Filer ID .
4 Date 10/04/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunkerley, Betty <hr/> 6 Contributor address; City; State; Zip Code 299 Makaha Dr Bastrop, TX 78602	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/27/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felker Jones, Laurie <hr/> Contributor address; City; State; Zip Code 6213 Pennwood Lane Austin, TX 78745	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/28/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Rudy <hr/> Contributor address; City; State; Zip Code 22516 Crazy Cove Spicewood, TX 78669	Amount of Contribution (\$) ** . \$250.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Garza EMC
Date 10/18/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Havey, Jason <hr/> Contributor address; City; State; Zip Code 3715 S 1st St Apt 234 Austin, TX 78704-0102	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) COO		Employer (See Instructions) Onnit Labs
Date 10/20/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heimsath, Ben <hr/> Contributor address; City; State; Zip Code 2104 Greenwood Ave Austin, TX 78723	Amount of Contribution (\$) \$50.00 ** .
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/11 Rpt: 7/24
2 FILER NAME Garza, Delia		3 Filer ID
4 Date 10/18/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herman, Rebecha 6 Contributor address; City; State; Zip Code 403 N Pleasant Valley Rd Austin, TX 78702-4838	7 Amount of Contribution (\$) \$350.00
8 Principal occupation / Job title (See Instructions) Office Manager		9 Employer (See Instructions) Onnit Labs
Date 09/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herrera, Tom Contributor address; City; State; Zip Code 2400 Mozelle Ln Austin, TX 78744-8033	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/18/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) House, Caitlin Contributor address; City; State; Zip Code 171 Wolf Berry Path Buda, TX 78610-2000	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Executive assistant		Employer (See Instructions) Onnit Labs
Date 10/13/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, John Contributor address; City; State; Zip Code 8537 Adirondack Trail Austin, TX 78759	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Dell Inc.
Date 10/11/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Melissa Contributor address; City; State; Zip Code 1203 A Elm Street Austin, TX 78703	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Community volunteer		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/11 Rpt: 8/24
2 FILER NAME Garza, Delia		3 Filer ID
4 Date 10/09/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Michael <hr/> 6 Contributor address; City; State; Zip Code 2045 Zach Scott Street Austin, TX 78723	7 Amount of Contribution (\$) .. . \$200.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) State of Texas
Date 10/18/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landeros, Daniel <hr/> Contributor address; City; State; Zip Code 8007 Cheno Cortina Trl Austin, TX 78749-2721	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/18/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lowe, Chase <hr/> Contributor address; City; State; Zip Code 171 Wolf Berry Path Buda, TX 78610-2000	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Manager- Business Development		Employer (See Instructions) Texas State Sports Properties
Date 10/18/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marcus, Aubrey <hr/> Contributor address; City; State; Zip Code 4401 Freidrich Ln Ste 302 Austin, TX 78744-1852	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Onnit
Date 10/09/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCann, Jana <hr/> Contributor address; City; State; Zip Code 4000 Pinckney St Austin, TX 78723-5397	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/11 Rpt: 9/24
2 FILER NAME Garza, Delia		3 Filer ID
4 Date 10/07/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McIver, Diana	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code 1433 Circle Ridge Dr C-100 Austin, TX 78746-3403	
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) DMA Companies
Date 10/04/2016	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00342907) Midwest Region Laborers' Political League	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code 1 N Old State Capitol Plz Ste 525 Springfield, IL 62701-1375	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/23/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moffat, Susan	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 4112 Speedway Austin, TX 78751	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/09/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mueller, Elizabeth	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 3213 French Place Austin, TX 78722	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/09/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Niland, Nona (Dr.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code 3939 Bee Cave Rd Bldg Austin, TX 78746	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Niland Foundation

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/11 Rpt: 10/24
2 FILER NAME Garza, Delia		3 Filer ID
4 Date 10/18/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Onnit Academy, LLC <hr/> 6 Contributor address; City; State; Zip Code 4401 Freidrich Ln Ste 301 Austin, TX 78744-1852	7 Amount of Contribution (\$) \$350.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/18/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Onnit Labs, LLC <hr/> Contributor address; City; State; Zip Code 4401 Freidrich Ln Ste 302 Austin, TX 78744-1852	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/18/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orr, Jessica <hr/> Contributor address; City; State; Zip Code 2702 Goldbridge Dr Austin, TX 78745-6860	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Assistant		Employer (See Instructions) Medical Equation
Date 10/18/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orr, Rhett <hr/> Contributor address; City; State; Zip Code 2702 Goldbridge Dr Austin, TX 78745-6860	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Director of Accounting		Employer (See Instructions) Onnit Labs
Date 10/03/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pena, Andres <hr/> Contributor address; City; State; Zip Code 306 Pearl Parkway San Antonio, TX 78215	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Government Relations		Employer (See Instructions) Kaufman & Killen, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: ** .
		Sch: 8/11 Rpt: 11/24
2 FILER NAME Garza, Delia		3 Filer ID
4 Date 10/05/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roa, Ruby 6 Contributor address; City; State; Zip Code 611 Terrell Hill Dr Austin, TX 78704	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/03/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Jennifer Contributor address; City; State; Zip Code 816 Congress Ave Ste 940 Austin, TX 78701	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Government Relations		Employer (See Instructions) McGuire Woods Consulting ** .
Date 10/03/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Marc Contributor address; City; State; Zip Code 1122 Colorado Suite 2399 Austin, TX 78701	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Government Relations		Employer (See Instructions) Offices of Marc A. Rodriguez
Date 10/24/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez-Mendoza, Amalia Contributor address; City; State; Zip Code 2710 Addison Ave Austin, TX 78757-2317	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/18/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roll Onnit, LLC Contributor address; City; State; Zip Code 4401 Freidrich Ln Ste 301 Austin, TX 78744-1852	Amount of Contribution (\$) \$350.00 ** .
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/11 Rpt: 12/24
2 FILER NAME Garza, Delia		3 Filer ID
4 Date 10/01/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) San Antonio Professional Firefighters PAC <hr/> 6 Contributor address: City; State; Zip Code PO Box 100455 San Antonio, TX 78201-1755	7 Amount of Contribution (\$) \$350.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/01/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Bradley <hr/> Contributor address: City; State; Zip Code 299 S Main St Ste 1300 Salt Lake City, UT 84111-2241	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) requested		Employer (See Instructions) requested
Date 10/09/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seely, Nina <hr/> Contributor address: City; State; Zip Code 8312 Plum Ridge Dr Austin, TX 78735	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/09/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sifuentes, Marina <hr/> Contributor address: City; State; Zip Code 2510 Camino Alto Austin, TX 78746-2408	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Realtor/Broker		Employer (See Instructions) MPM Properties
Date 10/18/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silva, Rocky <hr/> Contributor address: City; State; Zip Code 6519 Pevensey Dr Austin, TX 78745-3955	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Director of Warehouse Operations		Employer (See Instructions) Onnit Labs

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/11 Rpt: 13/24
2 FILER NAME Garza, Delia		3 Filer ID .. .
4 Date 10/22/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valls-Trelles, Patricia 6 Contributor address; City; State; Zip Code 2706 Sherwood Ln Austin, TX 78704-6438	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/01/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Von Dohlen, Chris Contributor address; City; State; Zip Code 1406 Kent Ln Austin, TX 78703-3819	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Entrepreneur & Investor		Employer (See Instructions) The Von Dohlen Group
Date 10/01/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Von Dohlen, Teresa Contributor address; City; State; Zip Code 1406 Kent Ln Austin, TX 78703-3819	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/09/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whatley, John Contributor address; City; State; Zip Code 2909 W 35th St Austin, TX 78703-1105	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 10/22/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitesides, Cindy Contributor address; City; State; Zip Code 8109 Valverde Austin, TX 78739	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 11/11 Rpt: 14/24

2 FILER NAME
Garza, Delia

3 Filer ID

4 Date
10/16/2016

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

7 Amount of Contribution (\$) \$350.00

6 Contributor address; City; State; Zip Code
9500 Zuniga Dr

Austin, TX 78749-1163

8 Principal occupation / Job title (See Instructions)
Director of Fitness Education

9 Employer (See Instructions)
Onnit Academy

Date
10/16/2016

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Wolf, Stephanie

Amount of Contribution (\$) \$350.00

Contributor address; City; State; Zip Code
9500 Zuniga Dr

Austin, TX 78749-1163

Principal occupation / Job title (See Instructions)
Homemaker

Employer (See Instructions)
None

Date
10/09/2016

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Young Brown, Patricia

Amount of Contribution (\$) \$100.00

Contributor address; City; State; Zip Code
6204 Diamond Head Circle

Austin, TX 78746

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2:
Sch: 1/1 Rpt: 15/24

2 FILER NAME
Garza, Delia

3 Filer ID

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$ 35.00

5 Date
10/24/2016

6 Full name of contributor ☐ out-of-state PAC (ID#: _____)
South Austin Democrats PAC

7 Contributor address, City, State, Zip Code
PO Box 152592

Austin, TX 78715-2592

8 Amount of contribution (\$)
\$304.00

9 In-kind contribution description
printing & mailing postcards

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)

11 Employer (FOR NON-JUDICIAL) (See instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/9 Rpt: 16/24	2 FILER NAME Garza, Delia	3 Filer ID
4 Date 10/19/2016	5 Payee name Azul Strategies	
6 Amount (\$) \$5,982.59	7 Payee address; City; State; Zip Code 1802 Ann Arbor Austin, TX 78704	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing & design services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/29/2016	Payee name Bumper Active Austin	
Amount (\$) \$776.00	Payee address; City; State; Zip Code 5925 Burnet Rd. Austin, TX 78756	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense t-shirts
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/30/2016	Payee name Contreras, Victoria	
Amount (\$) \$465.00	Payee address; City; State; Zip Code 1975 Aquarena Springs Dr. #334C San Marcos, TX 78666	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/9 Rpt: 17/24	2 FILER NAME Garza, Delia	3 Filer ID
4 Date 10/14/2016	5 Payee name Contreras, Victoria	
6 Amount (\$) \$540.00	7 Payee address; City; State; Zip Code 1975 Aquarena Springs Dr. #334C San Marcos, TX 78666	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/29/2016	Payee name DonateWay	
Amount (\$) \$155.22	Payee address; City; State; Zip Code P.O. Box 301267 Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense merchant account processing fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/24/2016	Payee name East Side Pies	
Amount (\$) \$109.32	Payee address; City; State; Zip Code 1401 Rosewood Austin, TX 78702	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense volunteer meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/9 Rpt: 18/24	2 FILER NAME Garza, Delia	3 Filer ID
4 Date 10/14/2016	5 Payee name Elleh, Mojana	
6 Amount (\$) \$300.00	7 Payee address; City; State; Zip Code 7330 Bluff Springs Dr. #4301 Austin, TX 78744	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/30/2016	Payee name Elleh, Mojana	
Amount (\$) \$450.00	Payee address; City; State; Zip Code 7330 Bluff Springs Dr. #4301 Austin, TX 78744	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/14/2016	Payee name Harry, Susan	
Amount (\$) \$650.00	Payee address; City; State; Zip Code P.O. Box 301074 Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Compliance consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/9 Rpt: 19/24	2 FILER NAME Garza, Delia	3 Filer ID
4 Date 10/14/2016	5 Payee name January, Sonja	
6 Amount (\$) \$300.00	7 Payee address; City; State; Zip Code 1124 Rutland Dr. #150 Austin, TX 78758	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/30/2016	Payee name January, Sonja	
Amount (\$) \$420.00	Payee address; City; State; Zip Code 1124 Rutland Dr. #150 Austin, TX 78758	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/14/2016	Payee name Johnson, Marquitus	
Amount (\$) \$300.00	Payee address; City; State; Zip Code 300 Ferguson Drr. #6406 Austin, TX 78753	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/9 Rpt: 20/24		2 FILER NAME Garza, Delia		3 Filer ID .. .
4 Date 09/30/2016		5 Payee name Johnson, Marquitus		
6 Amount (\$) \$480.00		7 Payee address; City; State; Zip Code 300 Ferguson Drr. #6406 Austin, TX 78753		
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor		
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 10/14/2016		Payee name Lascina, Julianne		
Amount (\$) \$180.00		Payee address; City; State; Zip Code 1109 South Pleasant Valley Rd. #836 Austin, TX 78741		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor		
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 09/30/2016		Payee name Lascina, Julianne		
Amount (\$) \$270.00		Payee address; City; State; Zip Code 1109 South Pleasant Valley Rd. #836 Austin, TX 78741		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor		
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/9 Rpt: 21/24		2 FILER NAME Garza, Delia		3 Filer ID
4 Date 10/08/2016		5 Payee name Lowe's		
6 Amount (\$) \$39.55		7 Payee address; City; State; Zip Code 5510 S. IH 35 Austin, TX 78745		
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense yard sign supplies		
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 10/23/2016		Payee name Lowe's		
Amount (\$) \$97.31		Payee address; City; State; Zip Code 5510 S. IH 35 Austin, TX 78745		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense yard sign supplies		
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 10/14/2016		Payee name Marshall, Alden		
Amount (\$) \$135.00		Payee address; City; State; Zip Code 303 East 21 St. #B324 Austin, TX 78705		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor		
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/9 Rpt: 22/24		2 FILER NAME Garza, Delia		3 Filer ID	
4 Date 09/30/2016		5 Payee name Ramos, Jennifer			
6 Amount (\$) \$1,250.00		7 Payee address: City: State: Zip Code 1730 E. Oltorf #401 Austin, TX 78741			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign manager salary	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/14/2016		Payee name Ramos, Jennifer			
Amount (\$) \$1,250.00		Payee address: City: State: Zip Code 1730 E. Oltorf #401 Austin, TX 78741			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign manager salary	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/14/2016		Payee name Robinson, Kelan			
Amount (\$) \$25.00		Payee address: City: State: Zip Code 1601 E. 10th Street Austin, TX 78702			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense return contribution	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/9 Rpt: 23/24	2 FILER NAME Garza, Delia	3 Filer ID
4 Date 10/17/2016	5 Payee name Serrano's	
6 Amount (\$) \$253.15	7 Payee address; City: State; Zip Code 9500 S. IH 35 Bldg. D Austin, TX 78748	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense volunteer appreciation lunch
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/14/2016	Payee name Velasquez, Jose	
Amount (\$) \$250.00	Payee address; City: State; Zip Code 2411 Willow Austin, TX 78702	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/14/2016	Payee name Verbeke, Betty	
Amount (\$) \$240.00	Payee address; City: State; Zip Code 810 Philco Dr. Austin, TX 78745	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

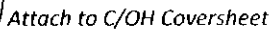
Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/9 Rpt: 24/24		2 FILER NAME Garza, Delia		3 Filer ID	
4 Date 09/30/2016		5 Payee name Wise, Jordan			
6 Amount (\$) \$465.00		7 Payee address; City; State; Zip Code 1975 Aquarena Springs Dr. #334C San Marcos, TX 78666			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/14/2016		Payee name Wise, Jordan			
Amount (\$) \$660.00		Payee address; City; State; Zip Code 1975 Aquarena Springs Dr. #334C San Marcos, TX 78666			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	



2016 NOV 2 PM 4 14

[illegible]



Candidate Bundling Report: Schedule ATX.5

Attach to C/OH Coversheet

List each individual bundler and the contributions bundled in Sections 1-4. For additional bundlers, click "Add Another Bundler Page" below.

1	BUNDLER NAME	Jason havey
2	BUNDLER ADDRESS	3715 S 1st St #234 Austin, TX 78704
3	AMOUNT BUNDLED	\$4,550

4 Itemize each contribution bundled by the bundler listed above

Contributor Last Name	Contributor First Name	Contribution Amount (\$)	Contribution Date (yyyymmdd)	Appears on Schedule
Havey	Jason	350	10/18/2016	A1
Herman	Rebecha	350	10/18/16	A1
House	Caitlin	350	10/18/2016	A1
Aubrey	Marcus	350	10/18/2016	A1
Onnit Academy, LLC		350	10/18/2016	A1
Onni Labs, LLC		350	10/18/2016	A1
Orr	Rhett	350	10/18/2016	A1
Roll Onnit, LLC		350	10/18/2016	A1
Silva	Rocky	350	10/18/2016	A1
Wolf	John	350	10/18/2016	A1
Wolf	Stephanie	350	10/18/2016	A1
Lowe	Chase	350	10/18/2016	A1
Orr	Jessica	350	10/18/2016	A1