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 (Ethics Commission Filers)

2 Total pages filed:

4

3	CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR: Mrs. FIRST: Laura MI: A.

NICKNAME   LAST   SUFFIX

Pressley, Ph.D.

Date Received

OCC RECEIVED AT
JUL 15 '19 PM 1:41

4	CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

101 Oak Street #248 Copperas Cove, TX 76522

☐ Change of Address

5	CANDIDATE / OFFICEHOLDER PHONE	AREA CODE ( ) PHONE NUMBER 512-762-3825 EXTENSION

Date Hand-delivered or Date Postmarked

6	CAMPAIGN TREASURER NAME	MS / MRS / MR: Mr. Marcelo FIRST MI

NICKNAME   LAST   SUFFIX

Tafoya

Receipt #   Amount $

Date Processed

Date Imaged

7	CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

2908 Overdale Austin TX 78723

8	CAMPAIGN TREASURER PHONE	AREA CODE ( ) PHONE NUMBER EXTENSION

512-698-4124

9 REPORT TYPE

☐ January 15   ☐ 30th day before election   ☐ Runoff   ☐ 15th day after campaign treasurer appointment (Officeholder Only)

☒ July 15   ☐ 8th day before election   ☐ Exceeded $500 limit   ☐ Final Report (Attach C/OH - FR)

10 PERIOD COVERED

Month / Day / Year: 1/1/19   THROUGH   Month / Day / Year: 6/30/19

11 ELECTION

ELECTION DATE   Month / Day / Year: 12/16/14

ELECTION TYPE: ☐ Primary   ☒ Runoff   ☐ Other Description   ☐ General   ☐ Special

12 OFFICE   OFFICE HELD (if any)

N/A

13 OFFICE SOUGHT (if known)

Austin City Council District 4

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME	15 Filer ID (Ethics Commission Filers)
Laura Pressley, Ph.D.	

16 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE 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	
☐ SPECIFIC	COMMITTEE ADDRESS
	COMMITTEE CAMPAIGN TREASURER NAME
☐ Additional Pages	
	COMMITTEE CAMPAIGN TREASURER ADDRESS

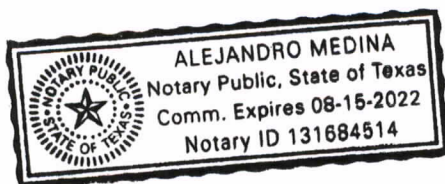| 17 CONTRIBUTION TOTALS	1.	TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$ 0
	2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 0
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED	$ 0
	4.	**TOTAL POLITICAL EXPENDITURES**	$ 0
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 0
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ $22,000

18 AFFIDAVIT

ALEJANDRO MEDINA
Notary Public, State of Texas
Comm. Expires 08-15-2022
Notary ID 131684514

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 _Laura Pressley_ , this the _15_

day of _July_ , 20 _19_ , to certify which, witness my hand and seal of office.

_____	_Alejandro Medina_	_Notary_
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath

SUBTOTALS - C/OH

19 FILER NAME

Laura Pressley, Ph.D.

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. ☐ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	$
2. ☐ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	$
3. ☐ SCHEDULE B: PLEDGED CONTRIBUTIONS	$
4. ☐ SCHEDULE E: LOANS	$ $22,000
5. ☐ SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	$
6. ☐ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	$
7. ☐ SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	$
8. ☐ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	$
9. ☐ SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	$
10. ☐ SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	$
11. ☐ SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	$
12. ☐ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	$

LOANS

SCHEDULE E

1 Total pages Schedule E:
1

2 FILER NAME
Mrs. Laura Pressley, Ph.D.

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS

$ 0

5 Date of loan	**7** Name of lender ☐ out-of-state PAC (ID#:_____)	**9** Loan Amount ($)
20140510	Mrs. Laura Pressley, Ph.D.	2,000

6 Is lender a financial Institution?
Y   N X

8 Lender address;   City;   State;   Zip Code
10203 Woodglen Cove   Austin Tx   78753

10 Interest rate
0

11 Maturity date
N/A

12 Principal occupation / Job title (See Instructions)
Owner

13 Employer (See Instructions)
Pure Rain, LLC

14 Description of Collateral
☒ none

15 Check if personal funds were deposited into political account (See Instructions)
☒

16 GUARANTOR INFORMATION

17 Name of guarantor
N/A

18 Guarantor address;   City;   State;   Zip Code
N/A

☒ not applicable

19 Amount Guaranteed ($)
N/A

20 Principal Occupation (See Instructions)
N/A

21 Employer (See Instructions)
N/A

Date of loan	Name of lender ☐ out-of-state PAC (ID#:_____)	Loan Amount ($)
20140902	Mrs. Laura Pressley, Ph.D.	20,000

Is lender a financial Institution?
Y   N X

Lender address;   City;   State;   Zip Code
10203 Woodglen Cove   Austin TX   78753

Interest rate
0

Maturity date
N/A

Principal occupation / Job title (See Instructions)
Owner

Employer (See Instructions)
Pure Rain, LLC

Description of Collateral
☒ none

Check if personal funds were deposited into political account (See Instructions)
☒

GUARANTOR INFORMATION

Name of guarantor
N/A

Guarantor address;   City;   State;   Zip Code
N/A

☒ not applicable

Amount Guaranteed ($)
N/A

Principal Occupation (See Instructions)
N/A

Employer (See Instructions)
N

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.