#### FORM C/OH CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID Total pages filed: The C/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00090029 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** Gregorio NAME Date Received **ELECTRONICALLY FILED** 07/15/2021 NICKNAME LAST **SUFFIX** Casar CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** 300 W Skyview Rd MAILING Receipt # Amount **ADDRESS** Change of Address Austin, TX 78752 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Montserrat NAME NICKNAME LAST **SUFFIX** Garibay **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE; **TREASURER** 1401 Cripple Creek Dr **ADDRESS** (Residence or Business) Austin, TX 78758 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 627-2313 **PHONE**

January 15

Day

Day

OFFICE HELD (if any)

Council Member, District 4

**ELECTION DATE** 

01/01/2021

Year

Year

July 15

Х

Month

Month

REPORT TYPE

**PERIOD** 

10 ELECTION

11 OFFICE

**COVERED** 

30th day before election

8th day before election

**THROUGH** 

Primary

General

Runoff

Exceeded modified

Month

**ELECTION TYPE** 

Runoff

Special

Day

06/30/2021

12 OFFICE SOUGHT (if known)

Year

Other

reporting limit

15th day after campaign treasurer appointment (officeholder only)
Final Report (Attach C/OH-FR)

## CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

2 of 5

13 C / OH NAME	Casar, Gregorio		<b>14</b> Filer ID 00090029	(Ethics Commission Filers)	
15 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.				
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
Ш	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDR	ESS		
16 CONTRIBUTION		AL CONTRIBUTIONS OF \$50 OR LESS (OTHE	R THAN PLEDGES,	\$ 0.00	
TOTALS		ARANTEES OF LOANS), UNLESS ITEMIZED		<b>v</b> 5.55	
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOA	NS)	\$ 0.00	
EXPENDITURE TOTALS	3. TOTAL POLITIC	AL EXPENDITURES OF \$100 OR LESS, UNLES	SS ITEMIZED	\$ 0.00	
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 1,200.00	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 6,799.38		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 0.00		
17 AFFADAVIT	•			<u>'</u>	
		I swear, or affirm, under pena true and correct and includes under Title 15, Election Code	all information required		
			Gregorio Casar		
		Signature	of Candidate or Officeho	older	
AFFIX NO	TARY STAMP / SEAL AB	OVE			
Sworn to and subso	cribed before me, by the s	aid	, this the	day	
of	, 20, to co	ertify which, witness my hand and seal of office.			
Signature of office	cer administering	Printed name of officer administering	Title of office	er administering oath	

# **SUBTOTALS - C/OH COVER SHEET PG 3**

			3 of 5
18 FILER NAME         19 Filer ID           Casar, Gregorio         00090029			(Ethics Commission Filers)
20 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		\$
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS		\$ 1,200.00
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTI	ONS	\$
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS		\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER		\$

FORM C/OH

## POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Total pages Schedule F1:   2 FILER NAME   3 Filer ID (Inthic Commission Fileri)   Casar, Gregorio   00090029		Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
4 Date 03/05/2021 5 Payee name Branscum, Ashlyn 5 Salaries/Wages/Contract Labor 03/05/2021 (a) Category (see Categores listed at the log of this schedule)	1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Branscum, Ashlyn  Amount (\$)		Sch: 1/2 Rpt: 4/5	Casar, Gregorio 00090029
Amount (\$)   7   Payee address; City; State; Zip Code	4	Date	5 Payee name
\$200.00   3524 Greystone dr unit 207   Austin, TX 78731    8		03/05/2021	Branscum, Ashlyn
Austin, TX 78731  8 PURPOSE OF EXPENDITURE  (a) Category (see Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  Office sought  Office held	6	Amount (\$)	7 Payee address; City; State; Zip Code
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Candidate/Officeholder name   Office sought   Office held			Austin, TX 78731
Salaries/Wages/Contract Labor   Clearly Austin, TX, officeholder Name appense stipend    9	8		
9 Complete ONLY if direct expenditure to benefit C/OH  Date 03/05/2021			Calaries/Wages/Contract Eason
9 Complete ONLX if direct expenditure to benefit C/OH  Date 03/05/2021			
Date 03/05/2021  Amount (\$)  Payee address; City; State; Zip Code  5915 Rickerhill Lane  Austin, TX 78739  PURPOSE OF EXPENDITURE  Candidate/Officeholder name 03/05/2021  Complete QNLY if direct expenditure to benefit C/OH  Date 03/05/2021  Payee andress; City; State; Zip Code  Salaries/Wages/Contract Labor  Complete QNLY if direct expenditure to benefit C/OH  Date 03/05/2021  Amount (\$)  Payee name Latham-Jones, Braden  Amount (\$)  Payee address; City; State; Zip Code  711 Hyde Park  Austin, TX 78748  PURPOSE OF EXPENDITURE  (a) Category (see Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  (b) Description Check if Austin, TX, officeholder living expense Stipend  (b) Description Check if Austin, TX, officeholder living expense Stipend  (b) Description Check if Austin, TX, 78748  PURPOSE OF EXPENDITURE  Candidate/Officeholder name Office sought Office held  Office held  Office held  Office held  Office held			
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O3/05/2021 Gomez-Chou, Sobeyda  Amount (\$) Payee address; City; State; Zip Code  \$200.00 \$915 Rickerhill Lane  Austin, TX 78739  PURPOSE OF EXPENDITURE  (a) Category (see Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Complete ONLY if direct expenditure to benefit C/OH  Date 03/05/2021  Amount (\$) Payee name Latham-Jones, Braden  Amount (\$) Payee address; City; State; Zip Code  711 Hyde Park  Austin, TX 78748  PURPOSE OF EXPENDITURE  (a) Category (see Categories listed at the top of this schedule)  \$200.00 The child ravel outside of Texas. Complete Schedule T.  Check if ravel outside of Texas. Complete Schedule T.  Check if ravel outside of Texas. Complete Schedule T.  Check if travel outside of Texas. Complete Schedule T.  Check if travel outside of Texas. Complete Schedule T.  Check if ravel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense stipend  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held	"		
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\$200.00   5915 Rickerhill Lane   Austin, TX 78739			
Austin, TX 78739  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Complete ONLY if direct expenditure to benefit C/OH  Date O3/05/2021  Amount (\$) Payee name Latham-Jones, Braden  Amount (\$) Payee address; City; State; Zip Code 711 Hyde Park  Austin, TX 78748  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  (b) Description  Office held  (b) Description  (c) Description  (d) Description  (e) Description  (f) Description  (h) Description  (h) Description  (h) Description  (h) Description  (h) Description  (h) Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense stipend  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held		, ,	
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### POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

#### SCHEDULE F1

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

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

Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

l	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:		-
	Sch: 2/2 Rpt: 5/5	Casar, Gregorio 00090029	
4	Date	5 Payee name	_
	03/05/2021	Pohlmeyer, Tara	
6	Amount (\$)	7 Payee address; City; State; Zip Code	-
	\$200.00	1813 E 38 1/2 St.	
		Austin, TX 78722	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Salaries/Wages/Contract Labor	
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		stipend	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O		
⊨	Date	Davisa nama	=
	03/05/2021	Payee name Rojas, Daniela	
⊢	Amount (\$)	Payee address; City; State; Zip Code	_
	\$200.00	1502 Inglewood St. Apt. B	
	Ψ200.00	1302 Ingiewood St. Apt. B	
		Austin, TX 78741	
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		stipend	
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	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
L			_
	Date	Payee name	
	03/05/2021	Valero, Jaelyn	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$200.00	3986 Lord Byron Circle	
		Round Rock, TX 78664	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.	
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