CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT**

FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form. 1 ACCOUNT # (Ethics Commission filers)			2 PAGE# 1 of 13			
3	CANDIDATE / OFFICEHOLDER	MS/MRS/MR FIRST Mrs. Mary E	llen	MI	OFFICE U	ISE ONLY
	NAME	NICKNAME LAST Pietrus;	,	SUFFIX	Date Received	рм3:15:47
4	CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #, 6211 John Chisum Lane	CITY;	STATE; ZIP CODE	Date Hand delivered	or Date Postmarked
	Change of Address	Austin, TX 78749			Date natio-delivered	o o Date Postmarked
					Receipt #	Amount
5	CAMPAIGN TREASURER	MS/MRS/MR FIRST		MI	Date Processed	
	NAME	Mr. Al			Date Imaged	
		NICKNAME LAST Lopez		SUFFIX		
6	CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); 7206 Providence Ave Austin, TX 78752	APT / SUITE #;	CITY; STATE;	ZIP CODE	
7	CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBE (512) 695-8170	ER	EXTENSION		
8	REPORT TYPE	January 15 30th da	ay before election	Runoff		campaign treasurer
		July 15 Sth day	before election	Exceeded \$500 limit	Final report (At	tach C/OH - FR)
9	PERIOD COVERED	Month Day Year		Month Day	Year	
		09/28/2012	THROUGH	10/27/20	12	
10	ELECTION	ELECTION DATE Month Day Year 11/06/2012	ELECTION TYPE Primary	Runoff	General	Special
11	OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known AISD Board District		

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

13 C/OH NAME Pietruszynski, Mary Ellen (Mrs.) 14 ACCOUNT # (Ethics Commission file				
15 NOTICE FROM	have been made with	ce of political expenditures by political committees to support the cand the candidate's or officeholder's knowledge or consent. Candidate by receive notice of such expenditures		
POLITICAL COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL	COMMITTEE ADDRESS		
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		
additional pages	ional pages	COMMITTEE CAMPAIGN TREASURER ADDRESS		
16 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00
101/120		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	22,450.74
EXPENDITURE TOTALS	3. TOTAL	POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	0.00
	4. TOTAL	POLITICAL EXPENDITURES	\$	35,079.79
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 27,06		27,068.99	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 0.00			0.00
17 AFFIDAVIT				



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 <u>Nary Ellen Pietrus zynski</u>, this the <u>29th</u> day of <u>October</u>, 20 12, to certify which, witness my hand and seal of office.

Storey McAdoo Auhei

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The Instruction	ON GUIDE explains how to complete this form.		1 PAGE#		
			Schedule: 1/4	Report: 3/13	
2 FILER NAME	Pietruszynski, Mary Ellen (Mrs.)		3 ACCOUNT#	(Ethics Commission filers)	
4 Date	5 Full name of contributor out-of-state PAC (ID#	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution	
	Austin Kids First PAC		Contribution (\$)	description (if applicable) In Kind Donation	
10/10/2012	6 Contributor address; City; State; Zip Code PO Box 78703 Austin, TX 78703		\$81.00		
•			(If travel outside of T	exas, complete Schedule T)	
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)		
Date	Full name of contributor out-of-state PAC (ID#	<u> </u>	Amount of	In-kind contribution	
	Austin Kids First PAC		contribution (\$)	description (if applicable)	
10/17/2012	Contributor address; City; State; Zip Code PO Box 78703 Austin, TX 78703		\$5,000.00		
	7.46.11., 7.7.7.7.6		(If travel outside of T	exas, complete Schedule T)	
Principal occur	pation / Job title (See Instructions)	Employer (See In		oxad, complete concaule 1,	
Date	Full name of contributor 🔲 out-of-state PAC (ID#	#)	Amount of	In-kind contribution	
	Austin Kids First PAC		contribution (\$)	description (if applicable)	
10/22/2012	Contributor address; City; State; Zip Code PO Box 78703 Austin, TX 78703		\$7,500.00 		
			(If travel outside of T	exas, complete Schedule T)	
Principal occup	pation / Job title (See Instructions)	Employer (See In:	<u> </u>		
Date	Full name of contributor out-of-state PAC (ID#	<u> </u>	Amount of	In-kind contribution	
	Davis, Gerald		contribution (\$)	description (if applicable)	
09/28/2012	Contributor address; City; State; Zip Code 5709 Gorham Glen Lane Austin, TX 78739		\$95.50		
			(If travel outside of T	exas, complete Schedule T)	
Principal occup President	pation / Job title (See Instructions)	Employer (See In: Goodwill Indus	structions) tries of Central Tex	as	
Date	Full name of contributor	±)	Amount of 1	In-kind contribution	
Dato	Finke, Michael		Amount of contribution (\$)	description (if applicable)	
09/28/2012	Contributor address; City; State; Zip Code 6306 Steer Trail Austin, TX 78749		\$95.50		
Deingial	action / lab title (Oce lastmetics)			exas, complete Schedule T)	
Principal occup	pation / Job title (See Instructions)	Employer (See In	Structions)		

The Instructi	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 2/4	Report: 4/13
2 FILER NAME	Pietruszynski, Mary Ellen (Mrs.)			(Ethics Commission filers)
4 Date	5 Full name of contributor out-of-state PAC (ID# Fluke, Brad		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
10/09/2012	6 Contributor address; City; State; Zip Code 1200 Barton Creek Blvd #54		\$1,000.00	
	Austin, TX 78735		(If travel outside of T	exas, complete Schedule T)
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/01/2012	Contributor address; City; State; Zip Code 911 Old Stonehedge Street Austin, TX 78746		\$477.50 	
			(If travel outside of 7	exas, complete Schedule T)
Principal occup Retired	pation / Job title (See Instructions)	Employer (See In:	structions)	
Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
10/01/2012	Contributor address; City; State; Zip Code 1002 Elm Street Austin, TX 78703		\$800.00 	
			(If travel outside of 7	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
10/05/2012	Contributor address; City; State; Zip Code 2909 Hillview Road Austin, TX 78703		\$238.75 	
			(If travel outside of 7	Texas, complete Schedule T)
Principal occup N/A	pation / Job title (See Instructions)	Employer (See In		
Date	Full name of contributor ut-of-state PAC (ID#	1	Amount of 1	In-kind contribution
Date	Lomas, Rachel)	Amount of contribution (\$)	description (if applicable)
10/09/2012	Contributor address; City; State; Zip Code 212 W. 33rd Street Austin, TX 78705		\$477.50 	
			(If travel outside of 1	Texas, complete Schedule T)
Principal occup N/A	pation / Job title (See Instructions)	Employer (See In	structions)	

The Instructi	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 3/4	Report: 5/13	
2 FILER NAME	Pietruszynski, Mary Ellen (Mrs.)		3 ACCOUNT#	(Ethics Commission filers)	
4 Date	5 Full name of contributor out-of-state PAC (ID#_Lopez, Albert		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
10/02/2012	6 Contributor address; City; State; Zip Code 7206 Providence Ave Austin, TX 78752		\$95.50 		
			(If travel outside of 1	Texas, complete Schedule T)	
9 Principal occup Executive Dir	pation / Job title (See Instructions) sector	10 Employer (See Instruction Economic Grown	ons) th Business Incuba	ator	
Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)	
10/02/2012	Contributor address; City; State; Zip Code 6108 Abilene Trail Austin, TX 78749		\$23.87		
			(If travel outside of 1	Texas, complete Schedule T)	
Principal occup	pation / Job title (See Instructions)		Employer (See Instructions)		
		Knights of Colu	mbus		
Date	Full name of contributor out-of-state PAC (ID# McGovern, John		Amount of contribution (\$)	In-kind contribution description (if applicable)	
10/03/2012	Contributor address; City; State; Zip Code 1907 Lakeshore Drive Austin, TX 78746		\$95.50		
			(If travel outside of 7	Texas, complete Schedule T)	
Principal occup Retired	pation / Job title (See Instructions)	Employer (See In	estructions)		
Date	Full name of contributor ut-of-state PAC (ID#		Amount of	In-kind contribution	
	Prewett, Matt		contribution (\$)	description (if applicable)	
10/12/2012	Contributor address; City; State; Zip Code 6902 Miranda Drive Austin, TX 78752		\$23.87		
			(If travel outside of 7	Texas, complete Schedule T)	
Principal occur Realtor	pation / Job title (See Instructions)	Employer (See In Realty Austin	estructions)		
Date	Full name of contributor ut-of-state PAC (ID#)	Amount of	In-kind contribution	
	Price, Eric		contribution (\$)	description (if applicable)	
10/02/2012	Contributor address; City; State; Zip Code 300 West 6th Street Suite 1840 Austin, TX 78701		\$477.50 		
			(If travel outside of T	exas, complete Schedule T)	
Principal occup Investor	pation / Job title (See Instructions)	Employer (See In	structions)		

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 4/4	Report: 6/13
2 FILER NAME	Pietruszynski, Mary Ellen (Mrs.)		3 ACCOUNT#	(Ethics Commission filers)
4 Date	5 Full name of contributor out-of-state PAC (ID# Rodgers, Brian		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
10/18/2012	6 Contributor address; City; State; Zip Code 1112 West 9th Street Austin, TX 78703	•••••	\$95.50 	
			(If travel outside of T	exas, complete Schedule T)
9 Principal occup Real Estate II	nation / Job title (See Instructions) nvestment	10 Employer (See Instruction Rodgers & Reio		
Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
10/16/2012	Contributor address; City; State; Zip Code 213 W 41st Street Austin, TX 78751		\$955.00 	
				Texas, complete Schedule T)
Principal occup Investor	pation / Job title (See Instructions)	Employer (See Ir	nstructions)	
Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
10/03/2012	Contributor address; City; State; Zip Code 1000 Rio Grande Austin, TX 78701		\$4,775.00 	
			(If travel outside of 7	Texas, complete Schedule T)
Principal occup Venture Capi	pation / Job title (See Instructions) tal	Employer (See In Silverton Partne		
Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
09/28/2012	Contributor address; City; State; Zip Code 4409 East Hove Loop Austin, TX 78749		\$47.75 	
				Texas, complete Schedule T)
Principal occup Educator	pation / Job title (See Instructions)	Employer (See In St. Edward's U		
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/12/2012	Contributor address; City; State; Zip Code 10800 Maelin Drive Austin, TX 78739		\$95.50	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Design Engir	pation / Job title (See Instructions)	Employer (See II	nstructions)	

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

ense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out of District

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

Fees	Printing Expense Office Overhead/ The Instruction Guide explains h		a category not listed above)
1 PAGE#	2 FILER NAME	ow to complete this form.	3 ACCOUNT # (TEC filers)
Schedule: 1/7 Re	port: 7/13 Pietruszynski, Mary Ellen (Mrs.)		(
4 Date 10/22/2012	5 Payee name Carter, Jessica Faith		
6 Amount (\$) \$1,000.00	7 Payee address City; State; Zip Code Austin, TX		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside Field Organizer	of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 10/01/2012	Payee name Dr. Don's Buttons		
Amount (\$) \$99.98	Payee address City; State; Zip Code 3906 W. Morrow Drive Glendale, AZ 85308		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside Bumper Stickers	of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 10/01/2012	Payee name Elite Change		
Amount (\$) \$11,377.25	Payee address City; State; Zip Code 315 West Alabama Suite 100 Houston, TX 77006		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside Mail Piece	of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 10/01/2012	Payee name Elite Change		
Amount (\$) \$6,000.00	Payee address City; State; Zip Code 315 West Alabama Suite 100 Houston, TX 77006		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description (If travel outside Campaign	of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense

EXPENDITURE CATEGORIES

ense 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	The instruction dube explains it	ow to complete this form.	and the second of the second o
1 PAGE# Schedule: 2/7 Re	2 FILER NAME Pietruszynski, Mary Ellen (Mrs.)	A TOTAL MANAGEMENT OF THE PROPERTY OF THE PROP	3 ACCOUNT # (TEC filers)
4 Date 10/05/2012	5 Payee name Greater Houston Media Group		
6 Amount (\$) \$725.00	7 Payee address City; State; Zip Code 1518 Anvil Dr. Houston, TX 77090		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outsid Logo Design	ie of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 10/21/2012	Payee name Greater Houston Media Group		
Amount (\$) \$568.31	Payee address City; State; Zip Code 1518 Anvil Dr. Houston, TX 77090		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outsid Graphic Design of Mail F	le of Texas, complete Schedule T) Piece
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 10/20/2012	Payee name Gutierrez, Martin		
Amount (\$) \$750.00	Payee address City; State; Zip Code Austin, TX		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outsid Field Organizer	de of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 10/18/2012	Payee name KXAN- NBC		
Amount (\$)	Payee address City; State; Zip Code		
\$650.00	908 Martin Luther King Jr. Blvd. Austin, TX 78701		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside Online Advertising	le of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

EXPENDITURE CATEGORIES
ense Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)

Fees Fees	Printing Expense I ravel Out of Dist Printing Expense Office Overhead/ The Instruction Guide explains he	Rental Expense OTHER (enter a category not listed above)
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 4/7 Re	port: 10/13 Pietruszynski, Mary Ellen (Mrs.)	
4 Date 09/28/2012	5 Payee name Piryx	
6 Amount (\$) \$4.50	7 Payee address City; State; Zip Code 401 West 15th St. Suite 520 Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) Online Donation Fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 10/01/2012	Payee name Piryx	
Amount (\$)	Payee address City; State; Zip Code	
\$22.50	401 West 15th St. Suite 520 Austin, TX 78701	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Donation Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 10/02/2012	Payee name Piryx	
Amount (\$)	Payee address City; State; Zip Code	
\$1.13	401 West 15th St. Suite 520 Austin, TX 78701	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Donation Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 10/02/2012	Payee name Piryx	
Amount (\$)	Payee address City; State; Zip Code	
\$4.50	401 West 15th St. Suite 520 Austin, TX 78701	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Donation Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

to benefit C/OH

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

EXPENDITURE CATEGORIES

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out of District
Office Overhead/Pental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

Fees Printing Expense OTHER (enter a category not listed above) Office Overhead/Rental Expense The INSTRUCTION GUIDE explains how to complete this form. 1 PAGE# 2 FILER NAME 3 ACCOUNT # (TEC filers) Pietruszynski, Mary Ellen (Mrs.) Schedule: 5/7 Report: 11/13 4 Date 5 Payee name Piryx 10/02/2012 6 Amount (\$) 7 Payee address City; State; Zip Code 401 West 15th St. \$22.50 Suite 520 Austin, TX 78701 8 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Fees Online Donation Fees OF **EXPENDITURE** Candidate / Officeholder name 9 Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Date Pavee name 10/03/2012 Piryx Amount (\$) Payee address City; State; Zip Code 401 West 15th St. \$4.50 Suite 520 Austin, TX 78701 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Fees Online Donation Fees OF **EXPENDITURE** Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 10/03/2012 Piryx Amount (\$) Payee address City; State; Zip Code \$225.00 401 West 15th St. Suite 520 Austin, TX 78701 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description **PURPOSE** Fees Online Donation Fees OF **EXPENDITURE** Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 10/05/2012 Piryx Amount (\$) Payee address State: City; Zip Code 401 West 15th St. \$11.25 Suite 520 Austin, TX 78701 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Online Donation Fees OF **EXPENDITURE** Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

EXPENDITURE CATEGORIES

ense 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)

Fees	Printing Expense Office Overhead/R The Instruction Guide explains ho	ental Expense OTHER (enter	r a category not listed above)
1 PAGE#	2 FILER NAME		3 ACCOUNT # (TEC filers)
Schedule: 7/7 Re			(120 mers)
4 Date 10/18/2012	5 Payee name Piryx		
6 Amount (\$) \$4.50	7 Payee address City; State; Zip Code 401 West 15th St. Suite 520 Austin, TX 78701		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description (If travel outside Online Donation Fees	e of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 10/11/2012	Payee name Postal Annex 223		
Amount (\$)	Payee address City; State; Zip Code		
\$7.20	6705 Hwy 290 W. Suite 502 Austin, TX 78735		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside Mailing forms sent to TEC	of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 10/17/2012	Payee name Zata 3 Consulting		
Amount (\$)	Payee address City; State; Zip Code		
\$11,000.00	458 New Jersey Avenue, SE Washington, DC 20003		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside Phone Banking	of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held: