

# 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 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / <u>MR</u> FIRST      MI <i>Todd</i> NICKNAME      LAST      SUFFIX <i>Meier</i>	<b>OFFICE USE ONLY</b> <div style="border: 2px solid black; padding: 5px; text-align: center;"> <b>RECEIVED</b>                      APR 08 2015                      By <i>Karla Horton</i> </div> Date Received Date Hand-delivered or Postmarked Receipt #      Amount Date Processed Date Imaged	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX;      APT / SUITE #;      CITY;      STATE;      ZIP CODE <i>3785 Park Place Addison TX 75001</i>		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE      PHONE NUMBER      EXTENSION <i>(972) 978-9126</i>		
6 CAMPAIGN TREASURER NAME	<u>MS</u> / MRS / MR      FIRST      MI <i>Paula</i> NICKNAME      LAST      SUFFIX <i>Sardura</i>		
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE);      APT / SUITE #;      CITY;      STATE;      ZIP CODE <i>14936 Oaks North Dallas, TX 75254</i>		
8 CAMPAIGN TREASURER PHONE	AREA CODE      PHONE NUMBER      EXTENSION <i>(214) 502-0212</i>		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" 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 type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
10 PERIOD COVERED	Month      Day      Year      THROUGH      Month      Day      Year <i>1 / 16 / 15</i> <i>4 / 9 / 15</i>		
11 ELECTION	ELECTION DATE Month      Day      Year <i>5 / 9 / 15</i>	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any) <i>MAYOR</i>	13 OFFICE SOUGHT (if known) <i>MAYOR</i>	

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2


4 C/OH NAME	15 ACCOUNT # (Ethics Commission Filers)
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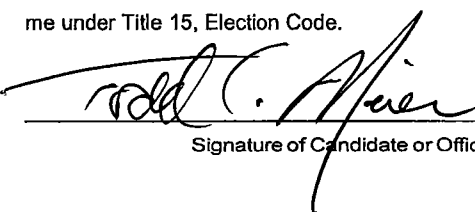
16 NOTICE FROM POLITICAL COMMITTEE(S)  THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.	COMMITTEE TYPE  <input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	COMMITTEE NAME  COMMITTEE ADDRESS  COMMITTEE CAMPAIGN TREASURER NAME  COMMITTEE CAMPAIGN TREASURER ADDRESS
	N/A	
	<input type="checkbox"/> additional pages	

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	\$ 39,091.86
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 20,885.02
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 50,000.00

18 AFFIDAVIT

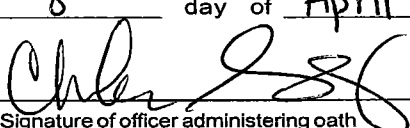
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



  
 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Todd Meyer, this the 8th day of April, 2015, to certify which, witness my hand and seal of office.

  
 Signature of officer administering oath

Chelsea Gonzalez  
 Printed name of officer administering oath

City Secretary  
 Title of officer administering oath

**POLITICAL EXPENDITURES**

**SCHEDULE F**

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

- |                     |                               |                                  |  |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials Expense | Salaries/Wages/Contract Labor    | Loan Repayment/Reimbursement               |
| Accounting/Banking  | Legal Services                | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense  | Food/Beverage Expense         | Travel In District               | Contributions/Donations Made By            |
| Event Expense       | Polling Expense               | Travel Out Of District           | Candidate/Officeholder/Political Committee |
| Fees                | Printing Expense              | Office Overhead/Rental Expense   | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:		2 FILER NAME <i>Murphy Nascia</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>1/16/15</i>		5 Payee name <i>815 A Brazos, Suite 304</i>			
6 Amount (\$) <i>250.<sup>00</sup></i>		7 Payee address; City; State; Zip Code <i>Austin, TEXAS 78701</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <i>Consulting Expense</i>		(b) Description (If travel outside of Texas, complete Schedule T) <i>Management Consulting</i> <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>MAYOR Todd Meier</i>		Office sought <i>MAYOR</i>	
Office held <i>MAYOR</i>					
Date <i>1/26/15</i>		Payee name <i>MURPHY NASCIA</i>			
Amount (\$) <i>\$5,204.<sup>48</sup></i>		Payee address; City; State; Zip Code <i>815 A Brazos, Suite 304 Austin, TEXAS 78701</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Advertising Expense</i>		Description (If travel outside of Texas, complete Schedule T) <i>2 page letter with survey insert</i> <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Todd Meier</i>		Office sought <i>MAYOR</i>	
Office held <i>MAYOR</i>					
Date <i>1/28/15</i>		Payee name <i>MURPHY NASCIA</i>			
Amount (\$) <i>\$250.<sup>00</sup></i>		Payee address; City; State; Zip Code <i>815 A Brazos, Suite 304 Austin, TEXAS 78701</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Consulting Expense</i>		Description (If travel outside of Texas, complete Schedule T) <i>Management Consulting</i> <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Todd Meier</i>		Office sought <i>MAYOR</i>	
Office held <i>MAYOR</i>					
Date <i>1/30/15</i>		Payee name <i>MURPHY NASCIA</i>			
Amount (\$) <i>\$9,000.<sup>48</sup></i>		Payee address; City; State; Zip Code <i>815 A Brazos, Suite 304 Austin, TEXAS 78701</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Advertising Expense</i>		Description (If travel outside of Texas, complete Schedule T) <i>Grassroots Campaign Plan + People</i> <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Todd Meier</i>		Office sought <i>MAYOR</i>	
Office held <i>MAYOR</i>					

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |                     |                               |                                  |  |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials Expense | Salaries/Wages/Contract Labor    | Loan Repayment/Reimbursement               |
| Accounting/Banking  | Legal Services                | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense  | Food/Beverage Expense         | Travel In District               | Contributions/Donations Made By            |
| Event Expense       | Polling Expense               | Travel Out Of District           | Candidate/Officeholder/Political Committee |
| Fees                | Printing Expense              | Office Overhead/Rental Expense   | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME <i>Todd Meier</i>	3 ACCOUNT # (Ethics Commission Filers)
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4 Date <i>2/3/15</i>	5 Payee name <i>Murphy Nasica</i>
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6 Amount (\$) <i>372.<sup>38</sup></i>	7 Payee address; City; State; Zip Code <i>815-A Brazos St Suite 304 Austin, Texas 78701</i>
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Advertising Expense</i>	(b) Description (If travel outside of Texas, complete Schedule T) <i>Push card design + printing</i> <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>2/26/15</i>	Payee name <i>Murphy Nasica</i>
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Amount (\$) <i>\$250.<sup>02</sup></i>	Payee address; City; State; Zip Code <i>815-A Brazos St. Suite 304 Austin, Texas 78701</i>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Consulting Expense</i>	Description (If travel outside of Texas, complete Schedule T) <i>Managemt Consulting -</i> <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Todd Meier</i>	Office sought <i>MAYOR</i>	Office held <i>MAYOR</i>
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Date <i>3/7/15</i>	Payee name <i>Tim Taft</i>
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Amount (\$) <i>2,500.<sup>02</sup></i>	Payee address; City; State; Zip Code <i>5606 Palomar Lane Dallas, Texas 75229-6416</i>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>other</i>	Description (If travel outside of Texas, complete Schedule T) <i>Refund of campaign contribution</i> <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Todd Meier</i>	Office sought <i>MAYOR</i>	Office held <i>Mayor</i>
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Date <i>3/7/15</i>	Payee name <i>Ron Rittenmeyer</i>
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Amount (\$) <i>\$5,000</i>	Payee address; City; State; Zip Code <i>2205 Plantation Lane Plano, Texas 75093</i>
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PURPOSE OF EXPENDITURE <i>8,122.<sup>38</sup></i>	Category (See categories listed at the top of this schedule) <i>other</i>	Description (If travel outside of Texas, complete Schedule T) <i>Refund of campaign contribution</i> <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Todd Meier</i>	Office sought <i>Mayor</i>	Office held <i>Mayor</i>
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |                     |                               |                                  |  |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials Expense | Salaries/Wages/Contract Labor    | Loan Repayment/Reimbursement               |
| Accounting/Banking  | Legal Services                | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense  | Food/Beverage Expense         | Travel In District               | Contributions/Donations Made By            |
| Event Expense       | Polling Expense               | Travel Out Of District           | Candidate/Officeholder/Political Committee |
| Fees                | Printing Expense              | Office Overhead/Rental Expense   | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME <i>Todd Miller</i>	3 ACCOUNT # (Ethics Commission Filers)
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4 Date <i>3/7/15</i>	5 Payee name <i>Bill Wilcox</i>
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6 Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended <i>2,500</i>	7 Payee address; City; State; Zip Code <i>15305 Dallas Parkway; Suite 1600 Addicks, Texas 75001</i>
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Other</i>	(b) Description (If travel outside of Texas, complete Schedule T) <i>Refund of campaign contribution</i> <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Date <i>3/7/15</i>	Payee name <i>Charles Solomon</i>
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Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended <i>\$315.00</i>	Payee address; City; State; Zip Code <i>12221 Ment Drive Dallas, Texas</i>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Other</i>	Description (If travel outside of Texas, complete Schedule T) <i>Refund of campaign contribution</i> <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Date <i>3/7/15</i>	Payee name <i>Frank Houseman</i>
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Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended <i>\$250</i>	Payee address; City; State; Zip Code <i>3920 Southwestern Blvd. Dallas, Texas 75225</i>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Other</i>	Description (If travel outside of Texas, complete Schedule T) <i>Refund of campaign contribution</i> <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Date <i>3/7/15</i>	Payee name <i>Steve Willard</i>
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Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended <i>\$1,000</i>	Payee address; City; State; Zip Code <i>P.O. Box 801843 Dallas, Texas 75380</i>
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PURPOSE OF EXPENDITURE <i>4065-84</i>	Category (See categories listed at the top of this schedule) <i>Other</i>	Description (If travel outside of Texas, complete Schedule T) <i>Refund of campaign contribution</i> <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |                     |                               |                                  |  |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials Expense | Salaries/Wages/Contract Labor    | Loan Repayment/Reimbursement               |
| Accounting/Banking  | Legal Services                | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense  | Food/Beverage Expense         | Travel In District               | Contributions/Donations Made By            |
| Event Expense       | Polling Expense               | Travel Out Of District           | Candidate/Officeholder/Political Committee |
| Fees                | Printing Expense              | Office Overhead/Rental Expense   | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME <i>Todd Meier</i>	3 ACCOUNT # (Ethics Commission Filers)
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4 Date <i>3/2/15</i>	5 Payee name <i>Bobby Lutz</i>
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6 Amount (\$) <i>\$1,000</i> <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code <i>17300 Dallas Parkway Suite 3040 Dallas, Texas 75248</i>
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Other</i>	(b) Description (If travel outside of Texas, complete Schedule T) <i>Refund of Campaign Contribution</i> <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Date <i>3/7/15</i>	Payee name <i>Steve Woodcock</i>
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Amount (\$) <i>200</i> <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <i>6409 Ladbrook Ct. Plano, Texas 75024-7460</i>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Other</i>	Description (If travel outside of Texas, complete Schedule T) <i>Refund of Campaign Contribution</i> <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Date <i>3/7/15</i>	Payee name <i>Frank Swingle</i>
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Amount (\$) <i>\$1,000</i> <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <i>13760 Noel Road, Ste 600 Dallas, Texas 75240-1381</i>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Other</i>	Description (If travel outside of Texas, complete Schedule T) <i>Refund of Campaign Contribution</i> <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Date <i>3/7/15</i>	Payee name <i>Joe Haggan</i>
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Amount (\$) <i>\$5,000</i> <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <i>5972 Azalea Lane Dallas, Texas 75230</i>
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PURPOSE OF EXPENDITURE <i>7,200</i>	Category (See categories listed at the top of this schedule) <i>Other</i>	Description (If travel outside of Texas, complete Schedule T) <i>Refund of Campaign Contribution</i> <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |                     |                               |                                  |  |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials Expense | Salaries/Wages/Contract Labor    | Loan Repayment/Reimbursement               |
| Accounting/Banking  | Legal Services                | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense  | Food/Beverage Expense         | Travel In District               | Contributions/Donations Made By            |
| Event Expense       | Polling Expense               | Travel Out Of District           | Candidate/Officeholder/Political Committee |
| Fees                | Printing Expense              | Office Overhead/Rental Expense   | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME <i>Joel Meiri</i>	3 ACCOUNT # (Ethics Commission Filers)
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4 Date <i>3/7/15</i>	5 Payee name <i>Robert Aisra</i>
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6 Amount (\$) <i>\$1,050</i> <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code <i>15601 Dallas Parkway Addicks, Texas 75001</i>
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Other</i>	(b) Description (If travel outside of Texas, complete Schedule T) <i>Refund of Campaign contribution</i> <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Date <i>3/15</i>	Payee name <i>Bruce Siffel</i>
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Amount (\$) <i>\$2,750</i> <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <i>5231 Royal Crest Dr. Dallas, Texas 75229</i>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Other</i>	Description (If travel outside of Texas, complete Schedule T) <i>Refund of Campaign contribution</i> <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Date <i>3/21/15</i>	Payee name <i>TERRY Londen</i>
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Amount (\$) <i>\$1,250.00</i> <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <i>5515 Preston Fairways Dallas, Texas 75252-4962</i>
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PURPOSE OF EXPENDITURE <i>\$1,000</i>	Category (See categories listed at the top of this schedule) <i>Other</i>	Description (If travel outside of Texas, complete Schedule T) <i>Refund of Campaign Contribution</i> <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Date	Payee name
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Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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