

# 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)  
00006502

2 PAGE #  
1 of 14

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR FIRST MI  
Dr. Edmund (Ted)  
NICKNAME LAST SUFFIX  
Gordon

OFFICE USE ONLY

Date Received  
DEC 9 14 7:58AM

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  
6508 Bradley Drive  
Austin, TX 78723

Change of Address

Date Hand-delivered or Date Postmarked

Receipt # Amount

5 CAMPAIGN TREASURER NAME

MS / MRS / MR FIRST MI  
Michael  
NICKNAME LAST SUFFIX  
Clement

Date Processed

Date Imaged

6 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX); APT / SUITE #; CITY; STATE; ZIP CODE  
*Opt Accounting  
171 Austin  
University Station  
Austin, TX 78712*

7 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION  
512 364 2847

8 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)

9 PERIOD COVERED

Month Day Year Month Day Year  
10/26/2014 THROUGH 12/07/2014

10 ELECTION

ELECTION DATE ELECTION TYPE  
Month Day Year  Primary  Runoff  General  Special  
12/16/2014

11 OFFICE

OFFICE HELD (if any)

12 OFFICE SOUGHT (if known)

Austin ISD, Board of Trustees  
District 1

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

13 C/OH NAME Gordon, Edmund (Ted) (Dr.)

14 ACCOUNT # (Ethics Commission filers)  
00006502

### 15 NOTICE FROM POLITICAL COMMITTEE(S)

.. This box is for notice of political expenditures 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. ..

<input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

additional pages

### 16 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00
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2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	14,710.00
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### EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	0.00
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4. TOTAL POLITICAL EXPENDITURES	\$	10,111.76
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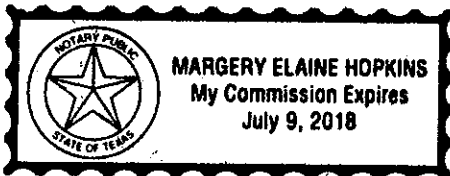
### CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	4,703.58
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### OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00
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### 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.

*Edmund T. Gordon*

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Edmund T. Gordon, this the 9<sup>th</sup> day of December, 2014, to certify which, witness my hand and seal of office.

*Margery Elaine Hopkins*

Signature of officer administering oath

Margery Elaine Hopkins

Print name of officer administering oath

Exec. Assist

Title of officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 1/7 Report: 3/14

**2** FILER NAME Gordon, Edmund (Ted) (Dr.)

**3** ACCOUNT # (Ethics Commission filers)  
00006502

**4** Date  
11/20/2014

**5** Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Berra, Joe

**7** Amount of contribution (\$) | **8** In-kind contribution description (if applicable)

**6** Contributor address; City; State; Zip Code  
7200 Bay City Bend  
Austin, TX 78725

\$100.00

(If travel outside of Texas, complete Schedule T)

**9** Principal occupation / Job title (See Instructions)

**10** Employer (See Instructions)

Date  
12/01/2014

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Betty Joe & Louis Hudspeth

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
8906 Wall St.  
Ste. 607  
Austin, TX 78754

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
12/01/2014

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Canning, Charlotte

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
915 E 38th 1/2  
Austin, TX 78751

\$50.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
11/24/2014

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Carter, Mia

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
2904 Oakhurst Ave.  
Austin, TX 78703

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
11/20/2014

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Charles Hale & Melissa Smith

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
1410 Alameda Dr.  
Austin, TX 78704

\$150.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/7 Report: 4/14	
2 FILER NAME Gordon, Edmund (Ted) (Dr.)		3 ACCOUNT # (Ethics Commission filers) 00006502	
4 Date  11/20/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Collin Group Inc.  6 Contributor address; City; State; Zip Code P.O. Box 2746 Pflugerville, TX 78681	7 Amount of contribution (\$)  \$25.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions)			
Date  11/15/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Donisi, John  Contributor address; City; State; Zip Code 2220 Parkway Austin, TX 78703	Amount of contribution (\$)  \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Winstead P.C.		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) Shareholder			
Date  11/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Echols, Catharine  Contributor address; City; State; Zip Code 508 Harris Ave. Austin, TX 78705	Amount of contribution (\$)  \$35.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date  11/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Education Austin PAC  Contributor address; City; State; Zip Code 316 W 12th Street Ste. 202 Austin, TX 78701	Amount of contribution (\$)  \$10,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date  11/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Elizabeth Weed & Steven Jacobs  Contributor address; City; State; Zip Code 2218 Alta Vista Ave Austin, TX 78704	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #  
Schedule: 3/7 Report: 5/14

2 FILER NAME Gordon, Edmund (Ted) (Dr.)

3 ACCOUNT # (Ethics Commission filers)  
00006502

4 Date 11/16/2014  
5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Forgione, Pascal D.

7 Amount of contribution (\$) 8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code  
8209 Guthrie Dr.  
Austin, TX 78750

\$25.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date 11/20/2014  
Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Hooker, Juliet

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
1411 Suffolk Dr.  
Austin, TX 78723

\$80.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 11/20/2014  
Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Jackson, Larry

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
7107 Dan Jean Drive  
#B  
Austin, TX 78745

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 11/20/2014  
Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Jane & Isaac Harrington

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
5304 Hallmark Dr.  
Austin, TX 78723

\$150.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 11/19/2014  
Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Jeffery Winesett & Tiffany Puett

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
4017 Brookview Road  
Austin, TX 78722

\$50.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #  
Schedule: 4/7 Report: 6/14

2 FILER NAME Gordon, Edmund (Ted) (Dr.)

3 ACCOUNT # (Ethics Commission filers)  
00006502

4 Date 11/20/2014  
5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Jennifer Potter-Miller & Robert Anthony Miller

7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code  
3909 Grayson Lane  
Austin, TX 78722

\$75.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date 11/20/2014  
Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Jones, Joni Lee

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
7111 Geneva Drive  
Austin, TX 78723

\$50.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 11/20/2014  
Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Jones, Joni Lee

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
7111 Geneva Drive  
Austin, TX 78723

\$50.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 11/24/2014  
Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Kisla Jimenez & Jonathan Williams

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
3012 West Ave.  
Austin, TX 78705

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 11/20/2014  
Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Larry Abraham & Dolly Lambdin

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
1708 Westmoor Dr.  
Austin, TX 78723

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

<b>The INSTRUCTION GUIDE explains how to complete this form.</b>		<b>1 PAGE #</b> Schedule: 5/7 Report: 7/14	
<b>2 FILER NAME</b> Gordon, Edmund (Ted) (Dr.)		<b>3 ACCOUNT #</b> (Ethics Commission filers) 00006502	
<b>4 Date</b>  11/20/2014	<b>5 Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Littlefield, Mark  <b>6 Contributor address; City; State; Zip Code</b> 7705 Vail Valley Dr. Austin, TX 78749	<b>7 Amount of contribution (\$)</b>  \$150.00	<b>8 In-kind contribution description (if applicable)</b>          (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
<b>9 Principal occupation / Job title (See Instructions)</b>		<b>10 Employer (See Instructions)</b>	
<b>Date</b>  11/13/2014	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) McCarver, James  <b>Contributor address; City; State; Zip Code</b> 1719 Manor Road Austin, TX 78722	<b>Amount of contribution (\$)</b>  \$100.00	<b>In-kind contribution description (if applicable)</b>          (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>	
<b>Date</b>  10/28/2014	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Oliver Nudd & Maria Franklin  <b>Contributor address; City; State; Zip Code</b> 2111 Cliffs Edge Austin, TX 78733	<b>Amount of contribution (\$)</b>  \$100.00	<b>In-kind contribution description (if applicable)</b>          (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>	
<b>Date</b>  11/18/2014	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Orrantina, Marcon Antonio  <b>Contributor address; City; State; Zip Code</b> 301 Barton Springs Austin, TX 78704	<b>Amount of contribution (\$)</b>  \$20.00	<b>In-kind contribution description (if applicable)</b>          (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>	
<b>Date</b>  11/24/2014	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Robbins, Jill  <b>Contributor address; City; State; Zip Code</b> 1719 Ben Crenshaw Way Austin, TX 78746	<b>Amount of contribution (\$)</b>  \$50.00	<b>In-kind contribution description (if applicable)</b>          (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #  
Schedule: 6/7 Report: 8/14

2 FILER NAME Gordon, Edmund (Ted) (Dr.)

3 ACCOUNT # (Ethics Commission filers)  
00006502

4 Date  
  
11/25/2014

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Sam Wilson & Cornelia Wolf

6 Contributor address; City; State; Zip Code  
2904 Oakhurst Ave.  
Austin, TX 78703

7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable)  
  
\$50.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date  
  
12/03/2014

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Travis County Democratic Party

Contributor address; City; State; Zip Code  
1311 E 6th Street  
Austin, TX 78703

Amount of contribution (\$) | In-kind contribution description (if applicable)  
  
\$350.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
10/28/2014

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
TSTA-PAC

Contributor address; City; State; Zip Code  
316 W 12th  
Austin, TX 78701

Amount of contribution (\$) | In-kind contribution description (if applicable)  
  
\$1,000.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
11/20/2014

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Vargas, Joao Costa

Contributor address; City; State; Zip Code  
6819 Williamette Dr.  
Austin, TX 78723

Amount of contribution (\$) | In-kind contribution description (if applicable)  
  
\$50.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
11/12/2014

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Wagner, Yasmin

Contributor address; City; State; Zip Code  
11213 South Bay Lane  
Austin, TX 78739

Amount of contribution (\$) | In-kind contribution description (if applicable)  
  
\$250.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 7/7 Report: 9/14

**2** FILER NAME Gordon, Edmund (Ted) (Dr.)

**3** ACCOUNT # (Ethics Commission filers)  
00006502

**4** Date  
11/19/2014

**5** Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
William & Estella Akins

**6** Contributor address; City; State; Zip Code  
1803 Astor Pl.  
Austin, TX 78721

**7** Amount of contribution (\$) | **8** In-kind contribution description (if applicable)

\$100.00

(If travel outside of Texas, complete Schedule T)

**9** Principal occupation / Job title (See Instructions)

**10** Employer (See Instructions)

Date  
11/20/2014

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
William Beardall & Jeanne Cook

Contributor address; City; State; Zip Code  
1815 Alta Vista  
Austin, TX 78704

Amount of contribution (\$) | In-kind contribution description (if applicable)

\$50.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# PLEGGED CONTRIBUTIONS

## SCHEDULE B

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #  
Schedule: 1/3 Report: 10/14

2 FILER NAME Gordon, Edmund (Ted) (Dr.)

3 ACCOUNT # (Ethics Commission filers)  
00006502

4 TOTAL OF UNITEMIZED PLEDGES:      ⇨   ⇨   ⇨   ⇨   ⇨   ⇨

\$

5 Date  
11/15/2014

6 Full name of pledgor  out-of-state PAC (ID# \_\_\_\_\_)  
Braziel, Amanda

7 Pledgor address;      City; State; Zip Code  
1507 Concordia Lane  
Austin, TX 78722

8 Amount of  
pledge (\$)  
\$50.00

9 In-kind description  
(if applicable)

(If travel outside of Texas, complete Schedule T)

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

Date  
11/17/2014

Full name of pledgor  out-of-state PAC (ID# \_\_\_\_\_)  
Frank, Tracy

Pledgor address;      City; State; Zip Code  
3813 Willowbrook Dr.  
Austin, TX 78722

Amount of  
pledge (\$)  
\$10.00

In-kind description  
(if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
11/19/2014

Full name of pledgor  out-of-state PAC (ID# \_\_\_\_\_)  
Harshman, Jeffery

Pledgor address;      City; State; Zip Code  
4116 Camacho Street  
Austin, TX 78723

Amount of  
pledge (\$)  
\$100.00

In-kind description  
(if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
11/19/2014

Full name of pledgor  out-of-state PAC (ID# \_\_\_\_\_)  
Irizarry, Yasmiyn

Pledgor address;      City; State; Zip Code  
4300 Berkman Dr., Unit B  
Austin, TX 78723

Amount of  
pledge (\$)  
\$100.00

In-kind description  
(if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
11/19/2014

Full name of pledgor  out-of-state PAC (ID# \_\_\_\_\_)  
Lance, Jan

Pledgor address;      City; State; Zip Code  
5102 Saddle Circle  
Austin, TX 78727

Amount of  
pledge (\$)  
\$100.00

In-kind description  
(if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# PLEGGED CONTRIBUTIONS

## SCHEDULE B

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #  
Schedule: 2/3 Report: 11/14

2 FILER NAME Gordon, Edmund (Ted) (Dr.)

3 ACCOUNT # (Ethics Commission filers)  
00006502

4 TOTAL OF UNITEMIZED PLEDGES:      ⇨   ⇨   ⇨   ⇨   ⇨   ⇨

\$

5 Date  11/19/2014	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Moffat, Susan	8 Amount of pledge (\$)  \$100.00	9 In-kind description (if applicable)
	7 Pledgor address; City; State; Zip Code 4112 Speedway Austin, TX 78751		
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

10 Principal occupation / Job title (See Instructions)	11 Employer (See Instructions)
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Date  11/15/2014	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Neavel, Nancy	Amount of pledge (\$)  \$50.00	In-kind description (if applicable)
	Pledgor address; City; State; Zip Code 2905 Scenic Drive Austin, TX 78703		
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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Date  11/15/2014	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Palmer, Deborah	Amount of pledge (\$)  \$250.00	In-kind description (if applicable)
	Pledgor address; City; State; Zip Code 1804 E 39th Street Austin, TX 78722		
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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Date  11/15/2014	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Palmer, Jean	Amount of pledge (\$)  \$100.00	In-kind description (if applicable)
	Pledgor address; City; State; Zip Code PO BOX 218 Lincoln, MA 01773		
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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Date  11/19/2014	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Prince, Kazique	Amount of pledge (\$)  \$500.00	In-kind description (if applicable)
	Pledgor address; City; State; Zip Code 1104 Angelina Austin, TX 78702		
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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# PLEGGED CONTRIBUTIONS

## SCHEDULE B

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #  
Schedule: 3/3 Report: 12/14

2 FILER NAME Gordon, Edmund (Ted) (Dr.)

3 ACCOUNT # (Ethics Commission filers)  
00006502

4 TOTAL OF UNITEMIZED PLEDGES:      ⇨   ⇨   ⇨   ⇨   ⇨   ⇨   ⇨   \$

5 Date  11/16/2014	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Reddick, Richard  7 Pledgor address;      City; State; Zip Code 2601 Lou Street Austin, TX 78727	8 Amount of pledge (\$)  \$50.00	9 In-kind description (if applicable)
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

10 Principal occupation / Job title (See Instructions)	11 Employer (See Instructions)
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Date  11/24/2014	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Saenz, Victor  Pledgor address;      City; State; Zip Code 4601 Rimrock Trail Austin, TX 78723	Amount of pledge (\$)  \$100.00	In-kind description (if applicable)
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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Date  11/19/2014	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Cherise  Pledgor address;      City; State; Zip Code 3701 Lawton Ave Austin, TX 78731	Amount of pledge (\$)  \$50.00	In-kind description (if applicable)
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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 PAGE # Schedule: 1/2 Report: 13/14	2 FILER NAME Gordon, Edmund (Ted) (Dr.)	3 ACCOUNT # (TEC filers) 00006502
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4 Date 12/02/2014	5 Payee name Austin Chronicle
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6 Amount (\$) \$725.00	7 Payee address City; State; Zip Code 4000 N I-35 Austin, TX 78751
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Print Advertisement  <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 11/28/2014	Payee name De Los Santos, Drew
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Amount (\$) \$1,500.00	Payee address City; State; Zip Code 2317 S Pleasant Valley Road #415 Austin, TX 78741
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Management  <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	Office sought:	Office held:
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Date 12/02/2014	Payee name Kelly Graphics
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Amount (\$) \$6,136.76	Payee address City; State; Zip Code 1409 Quaker Ridge Austin, TX 78746
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Mailer  <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	Office sought:	Office held:
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Date 11/19/2014	Payee name Rick Patrick Photography
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Amount (\$) \$750.00	Payee address City; State; Zip Code 1702 Francis Ave. Austin, TX 78703
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Photography  <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	Office sought:	Office held:
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# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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.

<b>1 PAGE #</b> Schedule: 2/2 Report: 14/14		<b>2 FILER NAME</b> Gordon, Edmund (Ted) (Dr.)		<b>3 ACCOUNT # (TEC filers)</b> 00006502	
<b>4 Date</b> 12/02/2014	<b>5 Payee name</b> The Rivas Group				
<b>6 Amount (\$)</b> \$1,000.00	<b>7 Payee address City; State; Zip Code</b> 111 Congress Ave. Ste. 400 Austin, TX 78701				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category (See Categories listed at the top of this schedule)</b> Consulting Expense		<b>(b) Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> General Consulting Services		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held: