

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

8388

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 #**
00069094 1 of 14

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY
	Mr.	Ramey		
	NICKNAME	LAST	SUFFIX	Date Received
		Ko		

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE
	PO Box 202422 Austin, TX 78702-2422				
<input type="checkbox"/> Change of Address					
Date Hand-delivered or Date Postmarked					
Receipt #			Amount		

5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI	Date Processed
	Mrs.	Cecilia		
	NICKNAME	LAST	SUFFIX	Date Imaged
		Crossley		

6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY;	STATE;	ZIP CODE
	3100 Catalina Drive Austin, TX 78741				

7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
		(512) 444-7035	

8 REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)
	<input checked="" 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)

9 PERIOD COVERED	Month	Day	Year	Month	Day	Year
	02/23/2014			THROUGH	06/30/2014	

10 ELECTION	ELECTION DATE	ELECTION TYPE
	Month Day Year 03/04/2014	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input checked="" type="checkbox"/> Special

11 OFFICE	OFFICE HELD (if any)	12 OFFICE SOUGHT (if known)

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

13 C/OH NAME Ko, Ramey (Mr.)

14 ACCOUNT # (Ethics Commission filers)
00069094

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. ..

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 0.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 200.00

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$ 0.00

4. TOTAL POLITICAL EXPENDITURES

\$ 89,162.47

CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 605.18

OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 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.



[Handwritten Signature]
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Ramey Ko, this the 15th day of July, 2014, to certify which, witness my hand and seal of office.

[Handwritten Signature]

Miri Choi

Notary Public

Signature of officer administering oath

Print name of officer administering oath

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: 1/1 Report: 3/14

2 FILER NAME Ko, Ramey (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00069094

4 Date
02/24/2014

5 Full name of contributor out-of-state PAC (ID# _____)
Bhargava, Marc

6 Contributor address; City; State; Zip Code
702 Franklin Blvd.
Unit A
Austin, TX 78751

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)
Co-founder, CEO

10 Employer (See Instructions)
Half Past Now

Date
02/25/2014

Full name of contributor out-of-state PAC (ID# _____)
Ezell, Rex

Contributor address; City; State; Zip Code
2803 Macken Street
Austin, TX 78703

Amount of contribution (\$) | In-kind contribution description (if applicable)
\$100.00 |

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Sales/Manager

Employer (See Instructions)
Valencia Hotels/Hampton Inn and Suites Downtown Austin

Date
02/28/2014

Full name of contributor out-of-state PAC (ID# _____)
Kao, Victor

Contributor address; City; State; Zip Code
520 West 43rd St., Apt. 16D
New York, NY 10036

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)
Attorney

Employer (See Instructions)
Frenkel Lambert Weiss Weisman & Gordon LLP

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense	Gifts/Awards/Memorial 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 PAGE # Schedule: 1/8 Report: 5/14	2 FILER NAME Ko, Ramey (Mr.)	3 ACCOUNT # (TEC filers) 00069094
---	--	---

4 Date 02/27/2014	5 Payee name Austin Chronicle
-----------------------------	---

6 Amount (\$) \$1,345.00	7 Payee address City; State; Zip Code PO Box 49066 Austin, TX 78765
------------------------------------	--

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"/> Advertising
------------------------------------	--	--

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
--	-------------------------------	----------------	--------------

Date 02/26/2014	Payee name Austin Progressive Coalition
--------------------	--

Amount (\$) \$750.00	Payee address City; State; Zip Code 4504 Ruiz Street Austin, TX 78723
-------------------------	---

8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage
------------------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
---	-------------------------------	----------------	--------------

Date 02/24/2014	Payee name Berlin Rosen LTD
--------------------	--------------------------------

Amount (\$) \$26,284.02	Payee address City; State; Zip Code 1776 Massachusetts Ave, NW Suite 601 Washington, DC 20036
----------------------------	--

8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Mail and Marketing
------------------------------------	--	--

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
---	-------------------------------	----------------	--------------

Date 03/03/2014	Payee name Berlin Rosen LTD
--------------------	--------------------------------

Amount (\$) \$26,205.62	Payee address City; State; Zip Code 1776 Massachusetts Ave, NW Suite 601 Washington, DC 20036
----------------------------	--

8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Mail and Marketing
------------------------------------	--	--

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
---	-------------------------------	----------------	--------------

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: 2/8 Report: 6/14		2 FILER NAME Ko, Ramey (Mr.)		3 ACCOUNT # (TEC filers) 00069094	
4 Date 03/21/2014	5 Payee name Burnt Orange Report LLC				
6 Amount (\$) \$1,342.86	7 Payee address City; State; Zip Code 908 E 5th St Ste 114 Austin, TX 78702				
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"/> Advertising		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 02/25/2014	Payee name Facebook				
Amount (\$) \$750.86	Payee address City; State; Zip Code 151 University Ave Palo Alto, CA 943011				
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"/> Advertising		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 03/01/2014	Payee name Facebook				
Amount (\$) \$763.42	Payee address City; State; Zip Code 151 University Ave Palo Alto, CA 943011				
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"/> Advertising		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 03/04/2014	Payee name Facebook				
Amount (\$) \$754.44	Payee address City; State; Zip Code 151 University Ave Palo Alto, CA 943011				
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"/> Advertising		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	

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: 3/8 Report: 7/14		2 FILER NAME Ko, Ramey (Mr.)		3 ACCOUNT # (TEC filers) 00069094	
4 Date 04/01/2014	5 Payee name Facebook				
6 Amount (\$) \$477.07	7 Payee address City; State; Zip Code 151 University Ave Palo Alto, CA 943011				
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"/> Advertising		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/24/2014	Payee name Google				
Amount (\$) \$500.00	Payee address City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043				
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"/> Advertising		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/25/2014	Payee name Google				
Amount (\$) \$500.00	Payee address City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043				
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"/> Advertising		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/26/2014	Payee name Google				
Amount (\$) \$500.00	Payee address City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043				
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"/> Advertising		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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: 4/8 Report: 8/14	2 FILER NAME Ko, Ramey (Mr.)	3 ACCOUNT # (TEC filers) 00069094
---	--	---

4 Date 02/28/2014	5 Payee name Google
-----------------------------	-------------------------------

6 Amount (\$) \$500.00	7 Payee address City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043
----------------------------------	--

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"/> Advertising
---------------------------------	--	--

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
--	-------------------------------	----------------	--------------

Date 03/01/2014	Payee name Google
--------------------	----------------------

Amount (\$) \$500.00	Payee address City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043
-------------------------	---

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"/> Advertising
------------------------	---	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
---	-------------------------------	----------------	--------------

Date 03/01/2014	Payee name Google
--------------------	----------------------

Amount (\$) \$500.00	Payee address City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043
-------------------------	---

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"/> Advertising
------------------------	---	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
---	-------------------------------	----------------	--------------

Date 03/02/2014	Payee name Google
--------------------	----------------------

Amount (\$) \$500.00	Payee address City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043
-------------------------	---

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"/> Advertising
------------------------	---	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
---	-------------------------------	----------------	--------------

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: 5/8 Report: 9/14		2 FILER NAME Ko, Ramey (Mr.)		3 ACCOUNT # (TEC filers) 00069094	
4 Date 03/03/2014		5 Payee name Google			
6 Amount (\$) \$500.00		7 Payee address City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043			
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"/> Advertising	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 03/04/2014		Payee name Google			
Amount (\$) \$500.00		Payee address City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043			
8 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"/> Advertising	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 03/05/2014		Payee name Google			
Amount (\$) \$500.00		Payee address City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043			
8 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"/> Advertising	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 03/06/2014		Payee name Google			
Amount (\$) \$500.00		Payee address City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043			
8 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"/> Advertising	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

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: 6/8 Report: 10/14		2 FILER NAME Ko, Ramey (Mr.)		3 ACCOUNT # (TEC filers) 00069094	
4 Date 03/08/2014	5 Payee name Mail Chimp				
6 Amount (\$) \$50.00	7 Payee address City; State; Zip Code 512 Means St Suite 404 Atlanta, GA 30318				
8 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) <input type="checkbox"/> Email fees		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 03/08/2014	Payee name Mail Chimp				
Amount (\$) \$1.00	Payee address City; State; Zip Code 512 Means St Suite 404 Atlanta, GA 30318				
8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Email fees		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/24/2014	Payee name Piryx				
Amount (\$) \$2.88	Payee address City; State; Zip Code 144 2nd St. 1st Floor San Francisco, CA 94105				
8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Processing Fees		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/25/2014	Payee name Piryx				
Amount (\$) \$5.75	Payee address City; State; Zip Code 144 2nd St. 1st Floor San Francisco, CA 94105				
8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Processing Fees		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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: 7/8 Report: 11/14		2 FILER NAME Ko, Ramey (Mr.)		3 ACCOUNT # (TEC filers) 00069094	
4 Date 02/28/2014		5 Payee name Piryx			
6 Amount (\$) \$2.88		7 Payee address City; State; Zip Code 144 2nd St. 1st Floor San Francisco, CA 94105			
8 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) <input type="checkbox"/> Processing Fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 03/06/2014		Payee name Renteria, Sabino			
Amount (\$) \$500.00		Payee address City; State; Zip Code 1511 Haskell Street Austin, TX 78702			
8 PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Field Services	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 03/03/2014		Payee name USPS			
Amount (\$) \$60.00		Payee address City; State; Zip Code 2201 Guadalupe St. Austin, TX 78711			
8 PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 02/25/2014		Payee name Worley Printing			
Amount (\$) \$72.53		Payee address City; State; Zip Code 3217 N Interstate Highway 35 Austin, TX 78722			
8 PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

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: 8/8 Report: 12/14	2 FILER NAME Ko, Ramey (Mr.)	3 ACCOUNT # (TEC filers) 00069094
--	--	---

4 Date 03/19/2014	5 Payee name Worley Printing
-----------------------------	--

6 Amount (\$) \$2,598.00	7 Payee address City; State; Zip Code 3217 N Interstate Highway 35 Austin, TX 78722
------------------------------------	--

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing
------------------------------------	---	---

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
--	-------------------------------	----------------	--------------

Date 03/10/2014	Payee name Y Strategy
--------------------	--------------------------

Amount (\$) \$12,000.00	Payee address City; State; Zip Code 603 W 13th Street Suite 2-G Austin, TX 78701
----------------------------	--

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"/> Consulting & Field Services
-------------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
---	-------------------------------	----------------	--------------

Date 03/04/2014	Payee name Your Flyers Delivered
--------------------	-------------------------------------

Amount (\$) \$2,800.00	Payee address City; State; Zip Code 10307 Morado Cove Austin, TX 78759
---------------------------	--

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"/> Advertising
-------------------------------	---	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
---	-------------------------------	----------------	--------------

--	--	--	--

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES

Advertising Expense	Gifts/Awards/Memorial 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 PAGE # Schedule: 1/1 Report: 13/14	2 FILER NAME Ko, Ramey (Mr.)	3 ACCOUNT # (TEC filers) 00069094
--	--	---

4 Date 03/13/2014	5 Payee name Y Strategy
-----------------------------	-----------------------------------

6 Amount (\$) \$6,896.14 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address City; State; Zip Code 603 W 13th Street Suite 2-G Austin, TX 78701
--	---

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> consulting and field services
---	---	--

INTEREST EARNED, OTHER CREDITS/GAINS/ REFUNDS, AND PURCHASE OF INVESTMENTS

SCHEDULE K

The INSTRUCTION GUIDE explains how to complete this form.

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

2 FILER NAME Ko, Ramey (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00069094

4 Date

02/25/2014

5 Name of person from whom amount is received
Pivot Group, Inc

8 Amount
(\$)

\$322.40

6 Address of person from whom amount is received; City; State; Zip Code
.....
17201 I St., NW, Suite 550
Washington, DC 20006

7 Purpose for which amount is received
refund for overpayment