

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME David Albert Escamilla **15** Filer ID (Ethics Commission Filers)

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

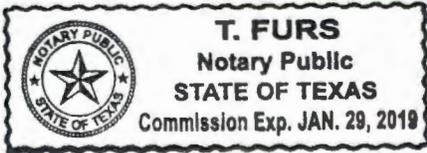
Additional Pages

17 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)	\$ 50,325.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 18,234.62
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 112,356.35
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

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.

D. A. Escamilla
Signature of Candidate or Officeholder



T. FURS
Notary Public
STATE OF TEXAS
Commission Exp. JAN. 29, 2019

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said David Albert Escamilla, this the 14th day of January, 2016, to certify which, witness my hand and seal of office.

T. Furs Signature of officer administering oath
Tamica Furs Printed name of officer administering oath
Admin. Assoc Title of officer administering oath

SUBTOTALS - C/OH

**FORM C/OH
COVER SHEET PG 3**

19 FILER NAME <p style="text-align: center;">David Albert Escamilla</p>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS	NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 50,325.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$ 0.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 18,084.62
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 150.00
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0.00
11.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 5,615.43
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0.00

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/17 Rpt: 4/30
2 FILER NAME Escamilla, David		3 Filer ID
4 Date 10/15/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armbrust & Brown PLLC	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code 100 Congress Ave Ste 1300 Austin, TX 78701	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/21/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armstrong, Gary	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 11503 Oak View Dr Austin, TX 78759	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/08/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin Bail Bonds	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code 3700 N IH 35 Austin, TX 78705	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/16/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin Police Association PAC	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code 5817 Wilcab Rd Ste 4 Austin, TX 78721	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/14/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berkel, Suzanne	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code 4405 Sinclair Ave Austin, TX 78756	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/17 Rpt: 5/30
2 FILER NAME Escamilla, David		3 Filer ID
4 Date 10/21/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackburn Betts PLLC	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code 1106 San Antonio St Austin, TX 78701	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/08/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackwell, Elizabeth	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code 1306 Nueces St Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/14/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bode, Amber	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code 1004 West Ave Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/21/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowman, Gordon	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 601 Coquina Ln Austin, TX 78746	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/12/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, Russell	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code 6405 Cascada Dr Austin, TX 78750	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/17 Rpt: 6/30
2 FILER NAME Escamilla, David		3 Filer ID
4 Date 10/21/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buchan, Jacqueline <hr/> 6 Contributor address; City; State; Zip Code 4111 Lullwood Austin, TX 78722	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/13/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Byrne, Daniel <hr/> Contributor address; City; State; Zip Code 221 W 6th St Ste 960 Austin, TX 78701	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canchola, Maria <hr/> Contributor address; City; State; Zip Code 1900 Eastside Dr Austin, TX 78704	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/19/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapa, Ricardo <hr/> Contributor address; City; State; Zip Code 9405 Morninghill Dr Austin, TX 78737	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/21/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chidester, Veronica <hr/> Contributor address; City; State; Zip Code 5233 Hutchinson Dr Austin, TX 78723	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/17 Rpt: 7/30
2 FILER NAME Escamilla, David		3 Filer ID
4 Date 10/17/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chris Dorbandt & Associates PLLC <hr/> 6 Contributor address; City; State; Zip Code 7000 Mo-Pac Expy Ste 200 Austin, TX 78731	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/12/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colmenero, Rodolfo <hr/> Contributor address; City; State; Zip Code 700 Lavaca St Ste 607 Austin, TX 78701	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/14/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corn, Cynthia <hr/> Contributor address; City; State; Zip Code 6613 Lost Horizon Dr Austin, TX 78759	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/21/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Courreges PC <hr/> Contributor address; City; State; Zip Code P.O. Box 92648 Austin, TX 78709	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/14/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cousar, James <hr/> Contributor address; City; State; Zip Code 1110 W. 7th St. Austin, TX 78703	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/17 Rpt: 8/30
2 FILER NAME Escamilla, David		3 Filer ID
4 Date 10/11/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crews, Joe <hr/> 6 Contributor address; City; State; Zip Code 1606 Rockmoor Ave Austin, TX 78703	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dameron, John <hr/> Contributor address; City; State; Zip Code 11700 Running Fox Tr Austin, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/21/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Chambers PC <hr/> Contributor address; City; State; Zip Code 1104 Nueces St Ste 208 Austin, TX 78701	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/21/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis-Jones, Kristina <hr/> Contributor address; City; State; Zip Code 12117 Tumbling Creek Trl Austin, TX 78748	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dreyfus, Mark <hr/> Contributor address; City; State; Zip Code 5902 Tumbling Cir Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/17 Rpt: 9/30
2 FILER NAME Escamilla, David		3 Filer ID
4 Date 10/21/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunham, Paul <hr/> 6 Contributor address; City; State; Zip Code 1200 Barton Creek Blvd Apt 42 Austin, TX 78735	7 Amount of Contribution (\$) \$10,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/21/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Christopher <hr/> Contributor address; City; State; Zip Code 1705 Rabb Rd Austin, TX 78704	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/21/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Florey, Ben <hr/> Contributor address; City; State; Zip Code 1800 Guadalupe St Austin, TX 78701	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fox, Bruce <hr/> Contributor address; City; State; Zip Code 404 W 13th St Austin, TX 78701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/21/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fox, Mykal <hr/> Contributor address; City; State; Zip Code 404 W 13th St Austin, TX 78701	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/17 Rpt: 10/30
2 FILER NAME Escamilla, David		3 Filer ID
4 Date 10/21/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frederick, David	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code 707 Rio Grande, Ste 200 Austin, TX 78701	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/22/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gammon, Rebecca	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 8304 Zyle Rd Austin, TX 78737	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/21/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garbe, Christie	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code 1211 Blair Way Austin, TX 78704	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/16/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Gustavo	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code 1012 Rio Grande St Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/27/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, Kenneth	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code 812 San Antonio St Ste 100 Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/17 Rpt: 11/30
2 FILER NAME Escamilla, David		3 Filer ID
4 Date 10/21/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Granger & Mueller PC	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code 605 W 10th St Austin, TX 78701	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/16/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregory, Bob	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code 2939 Westlake Cv Austin, TX 78746	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/20/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grigson, Charles	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code 604 W 12th St Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/21/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guy Herman Campaign Committee	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code P O Box 2561 Austin, TX 78768	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/21/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heidrick, Robert	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 3702 Eastledge Dr Austin, TX 78731	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/17 Rpt: 12/30
2 FILER NAME Escamilla, David		3 Filer ID
4 Date 10/21/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Thomas 6 Contributor address; City; State; Zip Code PO Box 1415 Austin, TX 78767	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/16/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Mack Contributor address; City; State; Zip Code 901 S Mopac Expy Bldg 1 Ste 300 Austin, TX 78746	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilgers, David Contributor address; City; State; Zip Code 701 Yaupon Valley Dr Austin, TX 78746	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howry Breen & Herman, LLP Contributor address; City; State; Zip Code 1900 Pearl St Austin, TX 78705	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/17/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Husch Blackwell LLP Contributor address; City; State; Zip Code 111 Congress Ave Ste 1400 Austin, TX 78701	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/17 Rpt: 13/30
2 FILER NAME Escamilla, David		3 Filer ID
4 Date 11/08/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) K & L Gates, LLP Committee for Good Government 6 Contributor address; City; State; Zip Code 2801 Via Fortuna, Ste 350 Austin, TX 78746	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/21/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Frank Contributor address; City; State; Zip Code 1601 Miriam Ave #221 Austin, TX 78702	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kucera, Gerald Contributor address; City; State; Zip Code 7200 N MoPac Expwy Ste 450 Austin, TX 78731	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/16/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Office of Randy Leavitt Contributor address; City; State; Zip Code 1301 Rio Grande St Austin, TX 78701	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/21/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Office of Sherri K. Tibbe Contributor address; City; State; Zip Code 1301 Rio Grande Austin, TX 78701	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/17 Rpt: 14/30
2 FILER NAME Escamilla, David		3 Filer ID
4 Date 10/21/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Offices of Alberto Garcia	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code 1715 S 1st St Austin, TX 78704	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/21/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Offices of David T. Bright	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code 802 N Carancahua St Ste 900 Corpus Christi, TX 78401	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Gary	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code 4501 Whispering Valley Dr Apt 25 Austin, TX 78727	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/18/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCormack, James	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code 2508 Ashley Worth Blvd, Ste 210 Austin, TX 78738	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/21/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCrimmon, Mark	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code 704 W 9th St Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/17 Rpt: 15/30
2 FILER NAME Escamilla, David		3 Filer ID
4 Date 10/19/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGinnis Lochridge & Kilgore LLP 6 Contributor address; City; State; Zip Code 600 Congress Ave Ste 2100 Austin, TX 78701	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/21/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minton Burton Bassett & Collins, PC Contributor address; City; State; Zip Code 1100 Guadalupe St Austin, TX 78701	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/05/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moden, Merle Contributor address; City; State; Zip Code 1111 Thompson Ranch Rd Wimberley, TX 78676	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/19/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montford, Melinda Contributor address; City; State; Zip Code 1100 Guadalupe St Austin, TX 78701	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/17/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ray & Wood Contributor address; City; State; Zip Code P.O. Box 165001 Austin, TX 78716	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/17 Rpt: 16/30
2 FILER NAME Escamilla, David		3 Filer ID
4 Date 10/17/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reaud, Reagan	7 Amount of Contribution (\$) \$5,000.00
	6 Contributor address; City; State; Zip Code 98 San Jacinto Blvd Ste 1400 Austin, TX 78701	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/13/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reed, Pamela	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code 1502 Harbor View Rd Austin, TX 78746	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/13/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ritz, Sandra	Amount of Contribution (\$) \$750.00
	Contributor address; City; State; Zip Code 902 Rio Grande St Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/21/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Marc	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code 1122 Colorado St Ste 2399 Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/04/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salinas, Froy	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 3604 Harpers Ferry Ln Austin, TX 78749	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/17 Rpt: 17/30
2 FILER NAME Escamilla, David		3 Filer ID
4 Date 10/21/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenkkan, Pieter	7 Amount of Contribution (\$) \$125.00
6 Contributor address; City; State; Zip Code 117 Laurel Ln Austin, TX 78705		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/21/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scholten, Emily	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 2617 W 45th St Austin, TX 78731		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/21/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schumacher, Richard	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 1303 July Dr Austin, TX 78753		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/20/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slack & Davis LLP	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 2705 Bee Caves Rd Ste 220 Austin, TX 78746		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/21/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, C. Craig	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 1908 Barton Pky Austin, TX 78704		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1. Sch: 15/17 Rpt: 18/30
2 FILER NAME Escamilla, David		3 Filer ID
4 Date 10/16/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spears, Franklin 6 Contributor address; City; State; Zip Code PO Box 160580 Austin, TX 78716	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/03/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spivey, Broadus Contributor address; City; State; Zip Code 3303 Northland Dr Ste 205 Austin, TX 78731	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/21/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, John Contributor address; City; State; Zip Code 704 W 9th St Austin, TX 78701	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/17/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The McCormick Law Firm Contributor address; City; State; Zip Code 1901 E Palm Valley Blvd Ste 218 Round Rock, TX 78664	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/19/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tierney, Danielle Contributor address; City; State; Zip Code 805 Post Oak St Austin, TX 78704	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1. Sch: 16/17 Rpt: 19/30
2 FILER NAME Escamilla, David		3 Filer ID
4 Date 11/13/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Travis County Sheriffs Law Enforcement Assoc. PAC 6 Contributor address; City; State; Zip Code 9400 Guerrero Ln Austin, TX 78747	7 Amount of Contribution (\$) \$1,250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/21/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Joseph Contributor address; City; State; Zip Code 1504 West Ave Austin, TX 78701	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/16/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turro, Stephen Contributor address; City; State; Zip Code 404 W 13th St Austin, TX 78701	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/19/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiser, David Contributor address; City; State; Zip Code 3009 Glenview Ave Austin, TX 78703	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/25/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whellan, Michael Contributor address; City; State; Zip Code 401 Congress Ave Ste 2200 Austin, TX 78701	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/17 Rpt: 20/30
2 FILER NAME Escamilla, David		3 Filer ID
4 Date 10/21/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Allan	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code 2400 Camino Alto Austin, TX 78746		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/21/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Sidney	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 7901 Cameron Rd Ste 2-355 Austin, TX 78754		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yeager, John	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 1310 Ardenwood Rd Austin, TX 78722		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/21/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zeller, Charles	Amount of Contribution (\$) \$125.00
Contributor address; City; State; Zip Code 811 N Tumbleweed Trl Austin, TX 78733		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/6 Rpt: 21/30		2 FILER NAME David Albert Escamilla		3 Filer ID (Ethics Commission Filers)	
4 Date 7/08/15		5 Payee name Austin Tejano Democrats			
6 Amount (\$) 50.00		7 Payee address; City; State; Zip Code c/o Gloria Aleman, Treasurer 2544 Stoutwood Circle, Austin TX 78745			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contribution Made By Officeholder		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution - Dues	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 8/31/15		Payee name Rattle Inn			
Amount (\$) 125.00		Payee address; City; State; Zip Code 610 Nueces Street Austin, TX 78701			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Event Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraiser Site Reservation	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 8/31/15		Payee name Alfred Stanley			
Amount (\$) 1500.00		Payee address; City; State; Zip Code 1409 Hardouin Avenue Austin, TX			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Consulting Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Services	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/6 Rpt: 22/30	2 FILER NAME David Albert Escamilla	3 Filer ID (Ethics Commission Filers)
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4 Date 10/01/15	5 Payee name Alfred Stanley
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6 Amount (\$) 1500.00	7 Payee address; City; State; Zip Code 1409 Hardouin Avenue Austin, TX
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Services
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10/21/15	Payee name Rattle Inn
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Amount (\$) 1324.40	Payee address; City; State; Zip Code 610 Nueces Street Austin, TX 78701
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraiser Site Rental
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10/21/15	Payee name Ranch 616
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Amount (\$) 786.51	Payee address; City; State; Zip Code 616 Nueces Street Austin, TX 78701
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraiser Food Expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/6 Rpt: 23/30	2 FILER NAME David Albert Escamilla	3 Filer ID (Ethics Commission Filers)
4 Date 11/01/15	5 Payee name Jan Soifer Campaign	
6 Amount (\$) 250.00	7 Payee address; City; State; Zip Code 98 San Jacinto Blvd., Ste. 540 Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contribution Made By Officeholder	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date 11/04/15	Payee name Alfred Stanley	
Amount (\$) 1500.00	Payee address; City; State; Zip Code 1409 Hardouin Avenue Austin, TX	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Services
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date 11/04/15	Payee name Worley Printing Company, Inc.	
Amount (\$) 774.52	Payee address; City; State; Zip Code 3217 North IH-35 Austin, TX 78722	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraiser Expenses
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/6 Rpt: 24/30	2 FILER NAME David Albert Escamilla	3 Filer ID (Ethics Commission Filers)
4 Date 11/16/15	5 Payee name Alfred Stanley	
6 Amount (\$) 5267.50	7 Payee address; City; State; Zip Code 1409 Hardouin Avenue Austin, TX	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Services
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date 11/23/15	Payee name Travis County Democratic Party	
Amount (\$) \$ 750.00	Payee address; City; State; Zip Code PO Box 684263 Austin TX 78768	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Primary Ballot Filing Fee
	Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date 12/09/15	Payee name Alfred Stanley	
Amount (\$) 1500.00	Payee address; City; State; Zip Code 1409 Hardouin Avenue Austin, TX	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Services
	Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/6 Rpt: 25/30		2 FILER NAME David Albert Escamilla		3 Filer ID (Ethics Commission Filers)	
4 Date 12/15/15		5 Payee name Brad Urrutia Campaign			
6 Amount (\$) 2500.00		7 Payee address; City; State; Zip Code P.O. Box 252, Manchaca, Texas, 78652			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contribution Made By Officeholder		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10/09/15		Payee name GoDaddy, Inc.			
Amount (\$) 12.79		Payee address; City; State; Zip Code 14455 N. Hayden Rd, Scottsdale, AZ 85260			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Solicitation Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Web Page Services	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10/09/15		Payee name GoDaddy, Inc.			
Amount (\$) 63.83		Payee address; City; State; Zip Code 14455 N. Hayden Rd, Scottsdale, AZ 85260			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Solicitation Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Web Page Services	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 1/2 Rpt: 27/30	2 FILER NAME David Albert Escamilla	3 Filer ID (Ethics Commission Filers)
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4 Date 07/20/15	5 Payee name Travis County Democratic Party
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6 Amount (\$) \$ 25.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code PO Box 684263 Austin TX 78768
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions Made By Officeholder	(b) Description Political Contribution <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 08/20/15	Payee name Travis County Democratic Party
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Amount (\$) \$ 25.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code PO Box 684263 Austin TX 78768
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions Made By Officeholder	(b) Description Political Contribution <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 09/21/15	Payee name Travis County Democratic Party
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Amount (\$) \$ 25.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code PO Box 684263 Austin TX 78768
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions Made By Officeholder	(b) Description Political Contribution <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/6 Rpt: 26/30	2 FILER NAME David Albert Escamilla	3 Filer ID (Ethics Commission Filers)
4 Date 10/31/15	5 Payee name PayPal	
6 Amount (\$) 179.17	7 Payee address; City; State; Zip Code 2211 N 1st Street, San Jose, CA 95131	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name _____ Office sought _____ Office held _____	
Date 11/30/15	Payee name PayPal	
Amount (\$) .90	Payee address; City; State; Zip Code 2211 N 1st Street, San Jose, CA 95131	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name _____ Office sought _____ Office held _____	
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name _____ Office sought _____ Office held _____	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 2/2 Rpt: 28/30	2 FILER NAME David Albert Escamilla	3 Filer ID (Ethics Commission Filers)
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4 Date 10/20/15	5 Payee name Travis County Democratic Party
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6 Amount (\$) \$ 25.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code PO Box 684263 Austin TX 78768
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions Made By Officeholder	(b) Description Political Contribution <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/20/15	Payee name Travis County Democratic Party
-------------------------	---

Amount (\$) \$ 25.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code PO Box 684263 Austin TX 78768
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions Made By Officeholder	(b) Description Political Contribution <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12/21/15	Payee name Travis County Democratic Party
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Amount (\$) \$ 25.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code PO Box 684263 Austin TX 78768
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions Made By Officeholder	(b) Description Political Contribution <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/2 Rpt: 29/30	2 FILER NAME <p style="text-align: center;">David Albert Escamilla</p>	3 Filer ID (Ethics Commission Filers)
4 Date <p style="text-align: center;">10/18/15</p>	5 Payee name <p style="text-align: center;">Planned Parenthood of Greater Texas, Inc.</p>	
6 Amount (\$) <p style="text-align: center;">1000.00</p>	7 Payee address; City; State; Zip Code <p style="text-align: center;">201 E. Ben White Blvd, Building B Austin, TX 78704</p>	
8 <p style="text-align: center;">PURPOSE OF EXPENDITURE</p>	(a) Category (See instructions for examples of acceptable categories.) <p style="text-align: center;">Contributions Made By Officeholder</p>	(b) Description (See instructions regarding type of information required.) <p style="text-align: center;">Charitable Contribution</p>
Date <p style="text-align: center;">11/24/15</p>	Payee name <p style="text-align: center;">El Mercado - Uptown</p>	
Amount (\$) <p style="text-align: center;">1028.38</p>	Payee address; City; State; Zip Code <p style="text-align: center;">1702 Lavaca Street Austin, TX 78701</p>	
<p style="text-align: center;">PURPOSE OF EXPENDITURE</p>	Category (See instructions for examples of acceptable categories.) <p style="text-align: center;">Event Expense</p>	Description (See instructions regarding type of information required.) <p style="text-align: center;">Office Holiday Party Site Reservation</p>
Date <p style="text-align: center;">11/24/15</p>	Payee name <p style="text-align: center;">Central Christian Church</p>	
Amount (\$) <p style="text-align: center;">150.00</p>	Payee address; City; State; Zip Code <p style="text-align: center;">1110 Guadalupe Street Austin, TX 78701</p>	
<p style="text-align: center;">PURPOSE OF EXPENDITURE</p>	Category (See instructions for examples of acceptable categories.) <p style="text-align: center;">Event Expense</p>	Description (See instructions regarding type of information required.) <p style="text-align: center;">Office Holiday Luncheon Site Reservation</p>
Date <p style="text-align: center;">12/17/15</p>	Payee name <p style="text-align: center;">Chantelle Abruzzo</p>	
Amount (\$) <p style="text-align: center;">200.00</p>	Payee address; City; State; Zip Code <p style="text-align: center;">15604 Poynette Place Austin, TX 78717</p>	
<p style="text-align: center;">PURPOSE OF EXPENDITURE</p>	Category (See instructions for examples of acceptable categories.) <p style="text-align: center;">Gift Expense</p>	Description (See instructions regarding type of information required.) <p style="text-align: center;">Staff Holiday Gift</p>

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NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 2/2 Rpt: 30/30	2 FILER NAME David Albert Escamilla	3 Filer ID (Ethics Commission Filers)
4 Date 12/28/15	5 Payee name Allison Tisdale	
6 Amount (\$) 3237.05	7 Payee address; City; State; Zip Code 2504 Monarch Dr. Austin, TX 78748	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories.) Food / Beverage Expense	(b) Description (See instructions regarding type of information required.) Reimbursement for Office/Employee Holiday Event @ El Mercado - Uptown
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)

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