CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

					, "
The C/OH Instruction Gui	DE explains how to complete th	ois form.	CCOUNT # Ethics Commission filers)	2 PAGE# 1 of 70	
3 CANDIDATE /	1	RST	MI	OFFICE	USE ONLY
OFFICEHOLDER NAME	Mrs. Lau	ra		Date Received	
		ST	SUFFIX	• •	
	Mor	rison			201
4 CANDIDATE /	ADDRESS / PO BOX; APT / SUITI	E#: CITY;	STATE; ZIP CODE		AUSTI R 2011 APR
OFFICEHOLDER	· ·	2	211 3022	!	AUSTIN RE
MAILING ADDRESS	610 Baylor Street Austin, TX 78703			Data Hand delivere	m <u>z</u>
Change of Address				Date Hallo-delivere	d or Dete PSSmarked
					PA YE
				Receipt #	Amount m
5 CAMPAIGN		RST	MI		N ×
TREASURER	l Mr. Man	K		Date Processed	<u> </u>
NAME	NICKNAME LA	s⊤ mutter	SUFFIX	. Date Imaged	
	STREET ADDRESS (NO PO BOX PLEAS			ZIP CODE	
6 CAMPAIGN TREASURER	1717 West 6th Street	SE); APT / SUITE #;	CITY; STATE;	ZIP CODE	
ADDRESS (Residence or business)	Suite 375 Austin, TX 78703				
(Nesidence of Dusiness)					-
7 CAMPAIGN TREASURER PHONE	(512) 476-4944	ABER	EXTENSION		
8 REPORT TYPE	January 15 X 30th	h day before election	Runoff	15th day after of appointment (co	campaign treasurer fficeholder only)
	July 15 Bth	day before election	Exceeded \$500 limit	Final report (At	tach C/OH - FR)
9 PERIOD COVERED	Month Day Year	THROUGH	Month D	lay Year	
COVENED	01/01/2011		04/04/	2011	
10 ELECTION	ELECTION DATE	ELECTION TYPE			
	Month Day Year	Primary	Runoff	X General	Special
	05/14/2011				
11 OFFICE	OFFICE HELD (if any) Austin City Council District	4	12 OFFICE SOUGHT (IF kn Austin City Counc	own) cil District 4	
13 NOTICE	Direct campaign expenditures a	re campaign expenditure	es made by others without the	e candidate's prior consent	or approval.
OF DIRECT CAMPAIGN	Candidates are required to disclose				
EXPENDITURE BY OTHER	Name				
INDIVIDUALS	i				
	Address/PO Box; Apt. / Suite #; C	ity; State; Zip Code	·		
—					
additional pages					
GO TO PAGE 2					

Texas Ethics Commission	P.O. Box 120	70 Austin, Texas 78711-2070	(512)463-5800	1-800-325-8506
CANDIDATE SUPPORT &		OLDER REPORT:		SHEET PG 2
14 C/OH NAME Morri	son, Laura (Mrs.)		15 ACCOUNT # 00000001	(Ethics Commission filers)
16 NOTICE FROM POLITICAL	have been made with information only if the	tice of political expenditures by political committees to support the calout the candidate's or officeholder's knowledge or consent. Candidate by receive notice of such expenditures		
COMMITTEE(S)	COMMITTEE TYPE			
	GENERAL	COMMITTEE ADDRESS		
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS		
17 CONTRIBUTION TOTALS		OLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00
	ł .	OLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	43,040.00
EXPENDITURE TOTALS	3. TOTAL P	OLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$	0.00
	4. TOTAL F	OLITICAL EXPENDITURES	\$	39,043.23
CONTRIBUTION BALANCE		OLITICAL CONTRIBUTIONS MAINTAINED AS OF THE Y OF THE REPORTING PERIOD	\$	59,439.30
OUTSTANDING LOAN TOTALS		RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE Y OF THE REPORTING PERIOD	\$	32,878.40
18 AFFIDAVIT				
	IRLEY A. GENTRY NOTARY PUBLIC State of Texas nm. Exp. 02-05-201	5) Laure V	all information requir	ed to be reported by
AFFIX NOTARY S'	TAMP / SEAL ABOVE	1 20 -	, this the	14 th day
of Opril, 20	. •	ify which, witness my hand and seal of office.	,	
Signature of officer admin	istering oath	Shirley A Gentry Print name of office administering oath	Title of officer admin	Public listering oath

OTHER	R THAN PLEDGES OR LOA	INS		
The Instruct	ION GUIDE explains how to complete this form.		1 PAGE# Schedule: 1/	53 Report: 3/70
2 FILER NAME	Morrison, Laura (Mrs.)		3 ACCOUNT# 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor	p#_C00011114)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
03/22/2011	6 Contributor address; City; State; Zip Code 1625 L Street NW Washington, DC 20036		\$350.00	†
			l :	Texas, complete Schedule T)
9 Principal occu n/a	pation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor)#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/18/2011	Contributor address; City; State; Zip Code 1813 Cedar Avenue Austin, TX 78702		\$50.00	! !
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
02/25/2011	Contributor address; City; State; Zip Code P.O. Box 300400 Austin, TX 78703	, , ,	\$200.00	
				Texas, complete Schedule T)
Principal occup Professor	pation / Job title (See Instructions)	Employer (See Ins University of Te		
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/29/2011	Contributor address; City; State; Zip Code 4106 Medical Parkway Austin, TX 78756		\$350.00 	
			<u> </u>	Texas, complete Schedule T)
Principal occup n/a	ation / Job title (See Instructions)	Employer (See Ins n/a	structions)	
Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
02/23/2011	Contributor address; City; State; Zip Code 7537 Cameron Road Austin, TX 78752		 \$350.00 	
			(If travel outside of 1	Texas, complete Schedule T)
Principal occup n/a	ation / Job title (See Instructions)	Employer (See Ins n/a	structions)	

OTHER THAN PLEDGES OR LOANS				
The Instructi	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 2/	53 Report: 4/70
2 FILER NAME	Morrison, Laura (Mrs.)		3 ACCOUNT# 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID Austin Police Association Political Action Commit		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
03/03/2011	6 Contributor address; City; State; Zip Code 400 West 14th Street Suite 230		\$350.00	
	Austin, TX 78701		l '	Texas, complete Schedule T)
9 Principal occur n/a	pation / Job title (See Instructions)	10 Employer (See In n/a	structions)	
Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
03/11/2011	Contributor address; City; State; Zip Code 400 West 14th Street Suite 230		\$350.00	
	Austin, TX 78701		(if travel outside of	Texas, complete Schedule T)
Principal occur n/a	pation / Job title (See Instructions)	Employer (See In n/a	structions)	
Date	Full name of contributor	<i>‡</i>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/18/2011	Contributor address; City; State; Zip Code 1500 Raleigh Avenue Austin, TX 78703		\$50.00	
D. Sandarda and a	20 / 10 / 00 - 10 - 10 - 10 - 10 - 10 - 1	F		Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/08/2011	Contributor address; City; State; Zip Code 1108 Lavaca Street Suite 110-122 Austin, TX 78701		\$100.00 	
			·	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/18/2011	Contributor address; City; State; Zip Code 1907 West 34th Street Austin, TX 78703		\$75.00 	·
			<u> </u>	exas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	tructions)	

OTHER	OTHER THAN PLEDGES OR LOANS			
The Instructi	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 3/	53 Report: 5/70
2 FILER NAME	Morrison, Laura (Mrs.)		3 ACCOUNT# 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (IDI Beinecke, Bridgette	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
01/14/2011	6 Contributor address; City; State; Zip Code 1111 Nueces Street Austin, TX 78701		\$200.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occup Consultant	pation / Job title (See Instructions)	10 Employer (See In Self	structions)	
Date	Full name of contributor	<u>; </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/02/2011	Contributor address; City; State; Zip Code 3801 Agape Lane Austin, TX 78735		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup ***Principal	pation / Job title (See Instructions)	Employer (See In Exeter Capital M		
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/08/2011	Contributor address; City; State; Zip Code 9206 Brigadoon Cove Austin, TX 78750		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)	
Date	Full name of contributor ut-of-state PAC (ID# Bond, Susanna)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/09/2011	Contributor address; City; State; Zip Code 1411 West Avenue Suite 100 Austin, TX 78701		\$25.00 	
Dringing opens	ation / Job title (See Instructions)	Employer (See Ins		Texas, complete Schedule T)
	auon / 355 ilite (See instructions)	Employer (See ins		
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/18/2011	Contributor address; City; State; Zip Code 1512 Holstein Drive Austin, TX 78758		\$25.00 <mark> </mark> 	
			(If travel outside of T	exas, complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employer (See Ins	tructions)	

The Instruct	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 4/	53 Report: 6/70
2 FILER NAME	Morrison, Laura (Mrs.)		3 ACCOUNT# 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
03/03/2011	6 Contributor address; City; State; Zip Code 22019 Cristobal Drive Garden Ridge, TX 78266		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occup **President	pation / Job title (See Instructions)	10 Employer (See In Yellow Cab Sar		
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/03/2011	Contributor address; City; State; Zip Code 22019 Cristobal Drive Garden Ridge, TX 78266		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup **None	pation / Job title (See Instructions)	Employer (See In: None	structions)	
Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
01/18/2011	Contributor address; City; State; Zip Code 2506 Douglas Street Austin, TX 78741		\$25.00	
			(If trave) outside of	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/18/2011	Contributor address; City; State; Zip Code 11200 Old Quarry Road Austin, TX 78717		\$75.00 	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	tructions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/01/2011	Contributor address; City; State; Zip Code 4213 Avenue F Austin, TX 78751		 \$50.00 	
			(If travel outside of T	exas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	tructions)	· · · · · · · · · · · · · · · · · · ·

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/5	53 Report: 7/70
2 FILER NAME	Morrison, Laura (Mrs.)		3 ACCOUNT# 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID Buck, Palmer)#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
01/24/2011	6 Contributor address; City; State; Zip Code 12525 Enchanted Forest Drive Austin, TX 78727		\$100.00	1
			(If travel outside of	Texas, complete Schedule T)
9 Principal occup	oation / Job title (See Instructions)	10 Employer (See In	istructions)	
Date	Full name of contributor)#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/04/2011	Contributor address; City; State; Zip Code 7905 Goldenrod Cove Austin, TX 78750		\$25.00	
				Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See Ins	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/04/2011	Contributor address; City; State; Zip Code 7905 Goldenrod Cove Austin, TX 78750		\$25.00 	ı L
			<u></u>	Texas, complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employer (See Ins	structions)	
Date	Full name of contributor ut-of-state PAC (ID) Building Owners and Managers Association of Au	 /]	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/01/2011	Contributor address; City; State; Zip Code P.O. Box 200532 Austin, TX 78720		\$350.00 	
-			(If travel outside of T	Texas, complete Schedule T)
Principal occupa n/a	ation / Job title (See Instructions)	Employer (See Ins n/a	structions)	
Date	Full name of contributor	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/18/2011	Contributor address; City; State; Zip Code 1307 Oxford Avenue Austin, TX 78704		\$200.00	
			(If travel outside of T	exas, complete Schedule T)
Principal occupa Attorney	ation / Job title (See Instructions)	Employer (See Ins Save Our Spring		

OTHER	R THAN PLEDGES OR LOA	NO CIN		
The Instruct	ION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/5	53 Report: 8/70
2 FILER NAME	Morrison, Laura (Mrs.)		3 ACCOUNT # 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID Buoy, Savy	0#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
02/22/2011	6 Contributor address; City; State; Zip Code 3910 South Dawn Cypress Court Houston, TX 77059		\$100.00	
			(if travel outside of	Texas, complete Schedule T)
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See In	nstructions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/31/2011	Contributor address; City; State; Zip Code 1111 West 7th Street Austin, TX 78703		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Arts	pation / Job title (See Instructions)	Employer (See In Self	<u> </u>	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/04/2011	Contributor address; City; State; Zip Code 802 Christopher Street Austin, TX 78704		\$150.00 	
Bississis	Labelia (Confedence)			Texas, complete Schedule T)
Principal occus	vation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/31/2011	Contributor address; City; State; Zip Code 221 West 6th Street Suite 600 Austin, TX 78701		\$350.00 	
Principal occup President	ation / Job title (See instructions)	Employer (See In: Bury+Partners		exas, complete Schedule T)
Date	Full name of contributor	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/31/2011	Contributor address; City; State; Zip Code 221 West 6th Street Suite 600 Austin, TX 78701		\$350.00 	
	Link Blic (Con Links of Con Lin			exas, complete Schedule T)
Principal occup None	ation / Job title (See Instructions)	Employer (See Ins None	suuciions)	

OTHER THAN PLEDGES OR LOANS				
The INSTRUCT	ION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/5	53 Report: 9/70
2 FILER NAME	Morrison, Laura (Mrs.)		3 ACCOUNT# 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
01/02/2011	6 Contributor address; City; State; Zip Code 1517 Alameda Drive Austin, TX 78704		\$100.00	!
			(If travel outside of	Texas, complete Schedule T)
	pation / Job title (See Instructions) ustries Development Manager	10 Employer (See Ir City of Austin	nstructions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
02/22/2011	Contributor address; City; State; Zip Code 1517 Alameda Drive Austin, TX 78704		\$100.00	
				·
Principal occur	pation / Job title (See Instructions)	Employer (See In	`	Texas, complete Schedule T)
	Istries Development Manager	City of Austin	_	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/30/2011	Contributor address; City; State; Zip Code 1605 Woodlawn Boulevard Austin, TX 78703		\$100.00 	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	<u>; </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/24/2011	Contributor address; City; State; Zip Code P.O. Box 9632 Austin, TX 78766		\$50.00 	
				exas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/18/2011	Contributor address; City; State; Zip Code 1201 Woodland Avenue Austin, TX 78704		\$15.00 	
			(If travel outside of T	exas, complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employer (See Ins	structions)	

Date

02/22/2011

Date

02/25/2011

Chan, Wan-Yu

613 Contadora San Antonio, TX 78258

Chowdhury, Ahsan

Contributor address;

6704 Havenbrook Cove Austin, TX 78759

Principal occupation / Job title (See Instructions)

Contributor address:

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 (512)463-5800 **POLITICAL CONTRIBUTIONS** SCHEDULE A OTHER THAN PLEDGES OR LOANS 1 PAGE# The Instruction Guide explains how to complete this form. Schedule: 8/53 Report: 10/70 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Morrison, Laura (Mrs.) 00000001 ut-of-state PAC (ID# Date 5 Full name of contributor In-kind contribution Amount of contribution (\$) description (if applicable) Carpenter, Susan 03/07/2011 6 Contributor address: City: State: Zip Code \$50.00 3028 Sunland Drive Austin, TX 78748 (If travel outside of Texas, complete Schedule T) g Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Full name of contributor ut-of-state PAC (ID# Amount of In-kind contribution Date contribution (\$) description (if applicable) Cathcart, Mark 01/14/2011 Contributor address; City; State; Zip Code \$100.00 605 West Johanna Street Austin, TX 78704 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

			(If travel outside of Te	oxas, complete Schedule T) 🔲
, , , , , , , , , , , , , , , , , , , ,		Employer (See In Unintech Const	e Instructions) nsulting Engineers, Inc.	
Date	Full name of contributor ut-of-state PAC (ID#_Chang, George)	Amount of contribution (\$)	In-kind contribution description (if applicable)
02/22/2011	Contributor address; City; State; Zip Code 13401 Wyoming Valley Drive Austin, TX 78727		\$100.00	
			(If travel outside of Te	exas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	

Fuil name of contributor ut-of-state PAC (ID#

Full name of contributor ut-of-state PAC (ID#

City; State; Zip Code

City; State; Zip Code

\$100.00

Amount of contribution (\$)

Amount of

contribution (\$)

\$350.00

In-kind contribution

description (if applicable)

In-kind contribution description (if applicable)

POLITICAL CONTRIBUTIONS OTHER THAN DIFFICES OF LOANS

OTHER	THAN PLEDGES OR LOA			
The Instruct	ION GUIDE explains how to complete this form.		1 PAGE# Schedule: 9/	53 Report: 11/70
2 FILER NAME	Morrison, Laura (Mrs.)		3 ACCOUNT # 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
01/18/2011	6 Contributor address; City; State; Zip Code 221 West 6th Street Suite 2000 Austin, TX 78701		\$250.00	
			1	Texas, complete Schedule T)
9 Principal occu Attorney	pation / Job title (See Instructions)	10 Employer (See In Blazier, Christe	nstructions) Insen, Bigelow & V	/irr, P.C.
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
02/24/2011	Contributor address; City; State; Zip Code 15005 Nightingale Lane Austin, TX 78734		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	Dation / Job title (See Instructions)	Employer (See In	<u>. </u>	Totalo, complete constant ()
Date	Full name of contributor	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/18/2011	Contributor address; City; State; Zip Code 3306 Gentry Drive Austin, TX 78746		\$15.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
02/09/2011	Contributor address; City; State; Zip Code 401 Texas Drive Georgetown, TX 78633		\$350.00 	
			(If travel outside of	Texas, complete Schedule T)
Principal occup **Retired	ation / Job title (See Instructions)	Employer (See Ins None	structions)	
Date	Full name of contributor ut-of-state PAC (ID# Connolly, Walter)	Amount of contribution (\$)	In-kind contribution description (if applicable)
02/09/2011	Contributor address; City; State; Zip Code 401 Texas Drive Georgetown, TX 78633		\$350.00 	
			(If travel outside of 1	exas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins None	·	tend (

OTHER	R THAN PLEDGES OR LOA	NS 		
The Instruct	ION GUIDE explains how to complete this form.		1 PAGE# Schedule: 10	0/53 Report: 12/70
2 FILER NAME	Morrison, Laura (Mrs.)		3 ACCOUNT # 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
01/18/2011	6 Contributor address; City; State; Zip Code 2208 Matthews Drive Austin, TX 78703		\$50.00	! ! !
			(If travel outside of	Texas, complete Schedule T)
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See Ir	nstructions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/31/2011	Contributor address; City; State; Zip Code 6717 Valburn Drive Austin, TX 78731		\$50.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occuj	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/31/2011	Contributor address; City; State; Zip Code 6717 Valburn Drive Austin, TX 78731		\$50.00	
			<u> </u>	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/09/2011	Contributor address; City; State; Zip Code 4500 Stearns Lane Sunset Valley, TX 78735		\$100.00 	
		<u></u>	(If travel outside of	Texas, complete Schedule T)
Principal occup	vation / Job title (See Instructions)	Employer (See Ins	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/07/2011	Contributor address; City; State; Zip Code 3018 West Avenue Austin, TX 78705		\$50.00 	
0.1	Control of the Contro		-	exas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)	

The Instruct	ION GUIDE explains how to complete this form.		1 PAGE # Schedule: 11	1/53 Report: 13/70
2 FILER NAME	Morrison, Laura (Mrs.)		3 ACCOUNT# 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID Cubillos, Ruben	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
04/02/2011	6 Contributor address; City; State; Zip Code P.O. Box 761113 San Antonio, TX 78245	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$250.00	
			(if travel outside of	Texas, complete Schedule T)
9 Principal occu ***President	pation / Job title (See Instructions)	10 Employer (See In A Big Chihuahu		
Date	Full name of contributor ut-of-state PAC (IDI Daniel, Harold	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/10/2011	Contributor address; City; State; Zip Code 3203 Cupid Drive Austin, TX 78735	· · · · · · · · · · · · · · · · · · ·	\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Systems Ana	pation / Job title (See Instructions) lyst	Employer (See In: Optimization Alt		
Date	Full name of contributor	<u>'</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/02/2011	Contributor address; City; State; Zip Code 510 East 7th Street Houston, TX 77007		\$350.00	
				Texas, complete Schedule T)
Principal occup **Community	ation / Job title (See Instructions) Volunteer	Employer (See Ins None	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/18/2011	Contributor address; City; State; Zip Code 6100 Wagon Bend Austin, TX 78744		\$20.00 	
			(If travel outside of l	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	tructions)	
Date	Full name of contributor ut-of-state PAC (ID# Daywood, Barbara)	Amount of contribution (\$)	In-kind contribution description (if applicable)
02/08/2011	Contributor address; City; State; Zip Code 11231 Tracton Lane Austin, TX 78739		\$200,00 <mark> </mark> 	
			(If travel outside of T	exas, complete Schedule T)
Principal occup Retired	ation / Job title (See Instructions)	Employer (See Ins None	tructions)	

Writing and Editing Professional

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 (512)463-5800 POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS 1 PAGE# The Instruction Guide explains how to complete this form. Schedule: 12/53 Report: 14/70 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Morrison, Laura (Mrs.) 0000001 Date 5 Full name of contributor ut-of-state PAC (ID#_ Amount of In-kind contribution contribution (\$) description (if applicable) De Luna, Megan 04/02/2011 6 Contributor address; City; State; Zip Code \$350.00 2500 National Park Boulevard Austin, TX 78747 (If travel outside of Texas, complete Schedule T) 10 Employer (See Instructions) Principal occupation / Job title (See Instructions) ***President O-SDA Industries Date Full name of contributor ut-of-state PAC (ID# Amount of In-kind contribution contribution (\$) description (if applicable) Deal, Eric 04/03/2011 Contributor address; City; State; Zip Code \$100.00 10703 McFarlie Cove Austin, TX 78750 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor ut-of-state PAC (ID#_ In-kind contribution Date Amount of contribution (\$) description (if applicable) Dealey, Amanda 01/18/2011 Contributor address; \$350.00 City; State; Zip Code 5401 Ridge Oak Drive Austin, TX 78731

Principal occu Investor	pation / Job title (See Instructions)	Employer (See In Self	structions)	
Date	Full name of contributor	<i>‡</i>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/25/2011	Contributor address; City; State; Zip Code 6112 Highlandale Drive Austin, TX 78731		\$100.00 	
				exas, complete Schedule T)
Principal occur	pation / Job title (See Instructions)	Employer (See In	structions)	

Date	Full name of contributor	D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
02/03/2011	Contributor address; City; State; Zip Code 9 Niles Road Austin, TX 78703	· · · · · · · · · · · · · · · · · · ·	\$350.00 	
			(If travel outside of Te	exas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	

Self

Electronic Filing Version 3.4.1

(If travel outside of Texas, complete Schedule T)

OTHER	THAN PLEDGES OR LOAD			
The Instruct	ION GUIDE explains how to complete this form.		1 PAGE # Schedule: 13	/53 Report: 15/70
2 FILER NAME	Morrison, Laura (Mrs.)		3 ACCOUNT# 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor out-of-state PAC (IDI DiLeo, Tracy	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
02/03/2011	6 Contributor address; City; State; Zip Code 9 Niles Road Austin, TX 78703		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occu Partner	pation / Job title (See Instructions)	10 Employer (See In Killam Compan		
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/13/2011	Contributor address; City; State; Zip Code 1517 Northwood Road Austin, TX 78703		\$100.00	1
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In:	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/20/2011	Contributor address; City; State; Zip Code 5602 Parade Ridge Austin, TX 78731		\$50.00 	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See Ins	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/15/2011	Contributor address; City; State; Zip Code 704 West Gibson Street Austin, TX 78704		\$50.00 <mark> </mark> 	
			(If travel outside of 1	exas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	tructions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/31/2011	Contributor address; City; State; Zip Code 508 Genard Street Austin, TX 78751		\$100.00 	
			(If travel outside of T	exas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	·	,
	·			

OTHER	R THAN PLEDGES OR LOA	NS		
The Instruct	ION GUIDE explains how to complete this form.		1 PAGE# Schedule: 14	I/53 Report: 16/70
2 FILER NAME	Morrison, Laura (Mrs.)		3 ACCOUNT # 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (IED ubov, Stephen	D#)	7 Amount of contribution (\$)	8
01/18/2011	6 Contributor address; City; State; Zip Code 701 Tillery Street A-12 Austin, TX 78702		\$25.00	
				Texas, complete Schedule T)
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See In	nstructions)	
Date	Full name of contributor)#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/28/2011	Contributor address; City; State; Zip Code 299 Makaha Bastrop, TX 78602		\$25.00]
			(If travel outside of	Texas, complete Schedule T)
Principal occu	oation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/18/2011	Contributor address; City; State; Zip Code 607 Patterson Austin, TX 78703		\$100.00	 - -
			(If travel outside of	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/18/2011	Contributor address; City; State; Zip Code 4522 Avenue F Austin, TX 78751		\$100.00 	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/07/2011	Contributor address; City; State; Zip Code 3005 Sparkling Brook Austin, TX 78746		\$350.00 	
			(If travel outside of T	Texas, complete Schedule T)
Principal occup None	ation / Job title (See Instructions)	Employer (See Ins None	structions)	

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 (512)463-5800 TDD 1-800-735-2989 POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS 1 PAGE# The Instruction Guide explains how to complete this form. Schedule: 15/53 Report: 17/70 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Morrison, Laura (Mrs.) 00000001 5 Full name of contributor ut-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Ellis, Chris 03/07/2011 6 Contributor address; City; State; Zip Code \$350.00 3005 Sparkling Brook Austin, TX 78746 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Commericial Real Estate Endeavor Real Estate Group Date Full name of contributor ut-of-state PAC (ID# Amount of In-kind contribution contribution (\$) description (if applicable) Elsner, Larry 03/03/2011 Contributor address; City; State; Zip Code \$100.00 1608 Preston Avenue Austin, TX 78703 (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) Date Amount of In-kind contribution contribution (\$) description (if applicable) Erwin, Gay Contributor address; City; State; Zip Code 03/21/2011 \$350.00 3 Jeffrey Cove Austin, TX 78746 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Vice President Strategic Partnerships, Inc. Date Amount of In-kind contribution contribution (\$) description (if applicable) Farrell, Jo Ann 02/05/2011 Contributor address; City; State; Zip Code \$50.00 6500 Sumac Austin, TX 78731 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

Full name of contributor ut-of-state PAC (ID# Amount of In-kind contribution contribution (\$) description (if applicable) Farris, Rachel 01/18/2011 Contributor address; City; State; Zip Code \$25.00 1206 Shelley Avenue Apartment É Austin, TX 78703 (If travel outside of Texas, complete Schedule T)

Date

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

OTHER	R THAN PLEDGES OR LOA	NS 		
The instruct	เอง Guide explains how to complete this form.		1 PAGE# Schedule: 16	6/53 Report: 18/70
2 FILER NAME	Morrison, Laura (Mrs.)		3 ACCOUNT# 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID Fox, Barbara	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
02/24/2011	6 Contributor address; City; State; Zip Code 1615 Whitney Way Austin, TX 78741		\$25.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/04/2011	Contributor address; City; State; Zip Code 7655 North FM 620 #824 Austin, TX 78726		\$150.00	
	Austin, 1X 78726]
Principal occur	option / Joh title /See Instructions)	Employer (See In	<u> </u>	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) Employer (See Instructions)				
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/04/2011	Contributor address; City; State; Zip Code 5311 Harmon Lane Austin, TX 78751		\$350.00	! -
			(If travel outside of	Texas, complete Schedule T)
Principal occup ***President	pation / Job title (See Instructions)	Employer (See Ins U.S. Hispanic C	structions) ontractors Associ	ation
Date	Full name of contributor ut-of-state PAC (ID# Getter, Becky	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/18/2011	Contributor address; City; State; Zip Code 1101 East 7th Street Austin, TX 78702		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup None	vation / Job title (See Instructions)	Employer (See Ins None	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/18/2011	Contributor address; City; State; Zip Code 1101 East 7th Street Austin, TX 78702		 \$350.00	
				Texas, complete Schedule T)
Principal occup CEO	ation / Job title (See Instructions)	Employer (See Ins Balcones Resou		

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 (512)463-5800 POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS 1 PAGE# The Instruction Guide explains how to complete this form. Schedule: 17/53 Report: 19/70 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Morrison, Laura (Mrs.) 00000001 5 Full name of contributor ut-of-state PAC (ID#_ In-kind contribution Date Amount of contribution (\$) description (if applicable) Glasco, Alice 02/13/2011 6 Contributor address; City; State; Zip Code \$25.00 5117 Valburn Court Austin, TX 78731 (If travel outside of Texas, complete Schedule T) 9 Principal occupation / Job title (See Instructions) 10 Employer (See instructions) Date Amount of In-kind contribution contribution (\$) description (if applicable) Goff, Gayle 01/18/2011 Contributor address; City; State; Zip Code \$25.00 1106 Upland Austin, TX 78741 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor ut-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Gottfried David Contributor address; City; State; Zip Code 01/11/2011 \$250.00 1629 Palma Plaza Austin, TX 78703 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Self Attorney In-kind contribution Date Amount of contribution (\$) description (if applicable) Grable, Michael 03/31/2011 Contributor address; City; State; Zip Code \$350.00 6109 Highland Hills Drive Austin, TX 78731 (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) Lone Star Transmission President Full name of contributor ut-of-state PAC (ID# Amount of In-kind contribution Date contribution (\$) description (if applicable) Guerra, Jose Contributor address; \$100.00 01/18/2011 City; State; Zip Code 908 Castle Ridge Road Austin, TX 78746 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

OTHER	THAN PLEDGES OR LOA	NS		
The Instruct	ION GUIDE explains how to complete this form.		1 PAGE# Schedule: 18	3/53 Report: 20/70
2 FILER NAME	Morrison, Laura (Mrs.)		3 ACCOUNT# 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
01/04/2011	6 Contributor address; City; State; Zip Code 3204 Fairfax Walk Austin, TX 78705		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See In	nstructions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/31/2011	Contributor address; City; State; Zip Code 10305 Dianella Lane		\$350.00	
	Austin, TX 78759			· · · · · · · · · · · · · · · · · · ·
Principal occur	pation / Job title (See Instructions)	Employer (See In	' _	Texas, complete Schedule T)
Software Eng		Varian Medical		
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/31/2011	Contributor address; City; State; Zip Code 10305 Dianella Lane Austin, TX 78759		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Software Eng	pation / Job title (See Instructions) gineer	Employer (See In Self	structions)	i
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/18/2011	Contributor address; City; State; Zip Code 1614 West 14th Street Austin, TX 78703		\$200.00	
				Texas, complete Schedule T)
Principal occup Vice Presider	ation / Job title (See Instructions) it	Employer (See In MWM Design G	,	
Date	Full name of contributor)	Amount of 1 contribution (\$)	In-kind contribution description (if applicable)
01/18/2011	Contributor address; City; State; Zip Code 10507 Cooper Hill Drive Austin, TX 78758		 \$25.00 	
			<u></u>	exas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)	

OTHER	R THAN PLEDGES OR LOA	NS 		
The Instruct	TION GUIDE explains how to complete this form.		1 PAGE# Schedule: 19	9/53 Report: 21/70
2 FILER NAME	Morrison, Laura (Mrs.)		3 ACCOUNT# 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID Harding, Annie	#)	7 Amount of contribution (\$)	8
02/07/2011	6 Contributor address; City; State; Zip Code 3404 A Grooms Street Austin, TX 78705	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$100.00	 -
			(If travel outside of	Texas, complete Schedule T)
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/18/2011	Contributor address; City; State; Zip Code 1409 Alameda Drive Austin, TX 78704		\$50.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See Ins	structions)	
Date	Full name of contributor	<u>; </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/09/2011	Contributor address; City; State; Zip Code 703 Main Street Bastrop, TX 78602		\$60.00	
			·	Texas, complete Schedule T)
Principal occuş	pation / Job title (See Instructions)	Employer (See Ins	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/09/2011	Contributor address; City; State; Zip Code 1104 Enfield Drive Austin, TX 78703	, , , , , , , , , , , , , , , , , , , ,	\$20.00 	
Drive is all against	option / Joh fills (Con Instructions)	Employer (See Ins	<u> </u>	Texas, complete Schedule T)
Principal occup	eation / Job title (See Instructions)	Employer (See ins	aructions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/07/2011	Contributor address; City; State; Zip Code 3010 Washington Square Austin, TX 78705		\$25.00 	
	The file of the state of the st		<u> </u>	exas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	tructions)	

OTHER THAN PLEDGES OR LOANS				
The INSTRUCT	ION GUIDE explains how to complete this form.		1 PAGE# Schedule: 20	0/53 Report: 22/70
2 FILER NAME	Morrison, Laura (Mrs.)		3 ACCOUNT # 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (III) Herndon, Dealey)#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
01/06/2011	6 Contributor address; City; State; Zip Code 2903 Tarry Trail Austin, TX 78703		\$25.00	r
ı			(If travel outside of	Texas, complete Schedule T)
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See In	nstructions)	
Date	Full name of contributor)#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/27/2011	Contributor address; City; State; Zip Code 2706 Nottingham Lane Austin, TX 78704		\$50.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In	nstructions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/18/2011	Contributor address; City; State; Zip Code 2943 Thousand Oaks Drive Austin, TX 78746		\$100.00 	
			<u> </u>	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/18/2011	Contributor address; City; State; Zip Code 2943 Thousand Oaks Drive Austin, TX 78746		\$100.00	
Principal occup	ation / Job title (See Instructions)	Employer (See In:		Texas, complete Schedule T)
		, , , , , , , ,	,	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/14/2011	Contributor address; City; State; Zip Code 1503 Inglewood Street Austin, TX 78741		\$100.00 	
•			(If travel outside of T	Texas, complete Schedule T)
Principal occup Legal Assista	ation / Job title (See Instructions) nt	Employer (See Ins Casey Gentz &	structions)	

				
The Instruction	ION GUIDE explains how to complete this form.	-	1 PAGE # Schedule: 21	1/53 Report: 23/70
2 FILER NAME	Morrison, Laura (Mrs.)		3 ACCOUNT# 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
03/08/2011	6 Contributor address; City; State; Zip Code 1503 Inglewood Street Austin, TX 78741		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occup Legal Assista	pation / Job title (See Instructions) ant	10 Employer (See In Casey Gentz &		
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/28/2011	Contributor address; City; State; Zip Code 1503 Inglewood Street Austin, TX 78741		\$50.00	
			<u> </u>	Texas, complete Schedule T)
Principal occup Legal Assista	pation / Job title (See Instructions) ant	Employer (See In Casey Gentz &		
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/22/2011	Contributor address; City; State; Zip Code 1801 West Avenue Austin, TX 78701		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Pharmacist	ation / Job title (See Instructions)	Employer (See In: Quick Pharmac		
Date	Full name of contributor uut-of-state PAC (ID# Israel, Celia)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/18/2011	Contributor address; City; State; Zip Code 3604 Carla Drive Austin, TX 78754		\$50.00 }	
			(If travel outside of	l'exas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/12/2011	Contributor address; City; State; Zip Code 506 West 34th Street Austin, TX 78705		\$50.00 	
	_		<u> </u>	exas, complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employer (See Ins	tructions)	

OTHER THAN PLEDGES OR LOANS				
The Instruct	ION GUIDE explains how to complete this form.		1 PAGE# Schedule: 22	2/53 Report: 24/70
2 FILER NAME	Morrison, Laura (Mrs.)		3 ACCOUNT # 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID Jack, Jamie)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
01/18/2011	6 Contributor address; City; State; Zip Code 625 South 45th Street Boulder, CO 80305		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occu Bartender	pation / Job title (See Instructions)	10 Employer (See In Tres Amigos	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
02/10/2011	Contributor address; City; State; Zip Code 3012 West Avenue Austin, TX 78705		\$50.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In:	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/27/2011	Contributor address; City; State; Zip Code 2000 Woodward Street Apt. 421 Austin, TX 78741		\$20.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)	
Date	Full name of contributor ut-of-state PAC (ID)	¥)	Amount of	In-kind contribution
	Kallerman, Richard	,	contribution (\$)	description (if applicable)
01/18/2011	Contributor address; City; State; Zip Code 2510 Cedarview Drive Austin, TX 78704		\$50.00 	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	tructions)	
Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/03/2011	Contributor address; City; State; Zip Code 711 Cinnamon Oak Lane Houston, TX 77079		\$350.00 <mark> </mark> }	
				Texas, complete Schedule T)
Principal occup **President	ation / Job title (See Instructions)	Employer (See Ins Yellow Cab Hous		

OTHER	THAN PLEDGES OR LOA	NS		
The Instruct	ION GUIDE explains how to complete this form.		1 PAGE# Schedule: 23	1/53 Report: 25/70
2 FILER NAME	Morrison, Laura (Mrs.)		3 ACCOUNT# 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
03/03/2011	6 Contributor address; City; State; Zip Code 711 Cinnamon Oak Lane Houston, TX 77079		\$350.00	1 1 1
		·	<u> </u>	Texas, complete Schedule T)
9 Principal occup **None	pation / Job title (See Instructions)	10 Employer (See Ir None	nstructions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
02/28/2011	Contributor address; City; State; Zip Code 8834 Honeysuckle Trail Austin, TX 78759		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup **Owner	pation / Job title (See Instructions)	Employer (See In TKO Swim Sch	structions)	<u> </u>
Date •	Full name of contributor	,)	Amount of contribution (\$)	In-kind contribution description (if applicable)
02/28/2011	Contributor address; City; State; Zip Code 8834 Honeysuckle Trail Austin, TX 78759	• • • • • • • • • • • • • • • • • • • •	\$350.00	
			<u> </u>	Texas, complete Schedule T)
Principal occup **President	ation / Job title (See Instructions)	Employer (See In: Yellow Cab Aus		
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
02/22/2011	Contributor address; City; State; Zip Code 7914 Bee Caves Road Austin, TX 78746		\$350.00	
Principal occup President	ation / Job title (See Instructions)	Employer (See Ins Encotech		Foxas, complete Schedule T)
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
02/22/2011	Contributor address; City; State; Zip Code 7914 Bee Caves Road Austin, TX 78746		\$350.00 <mark> </mark> 	
	tion (lab title (Con Instruction))			exas, complete Schedule T)
Principal occupi President	ation / Job title (See Instructions)	Employer (See Ins Accurate CAD &	structions) Technical Service	es

The i	İnstructi	ом Guide explains how to com	plete this form.		1 PAGE#	1/52 Daniel 26/70
2 FILEF	R NAME	Morrison, Laura (Mrs.)			3 ACCOUNT# 00000001	(Ethics Commission filers)
4 Dat	te	5 Full name of contributor Kim, Jennifer	out-of-state PAC (ID	#)	7 Amount of contribution (\$)	8 In-kind contribution description (If applicable)
02/22	2/2011	6 Contributor address; 755 East Oltorf Street Apt 201 Austin, TX 78704	City; State; Zip Code		\$200.00	
a Balant		tion / Joh title /Co. John time		Las Esselves (Cooks	<u> </u>	Texas, complete Schedule T)
. – ,	Preside	pation / Job title (See Instruction nt	s) 	10 Employer (See In Jamail & Smith		
Dat	te	Full name of contributor Kincannon, Holly	out-of-state PAC (ID	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/18	3/2011	Contributor address; (3102 Lafayette Avenue Austin, TX 78722	City; State; Zip Code		\$150.00	
					(If travel outside of	Texas, complete Schedule T)
Princir	nal occur	 pation / Job title (See Instructions	3)	Employer (See In	<u> </u>	Texas, complete schedule 1)
			·····			
Date	е	Full name of contributor King, Micah	☐ out-of-state PAC (ID#	# <u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
02/16/	/2011	Contributor address; (1512A Pennsylvania Avenue Austin, TX 78702	City; State; Zip Code		\$30.00	
					<u> </u>	Texas, complete Schedule T)
Princip	oal occup	ation / Job title (See Instructions	;) 	Employer (See In:	structions)	
Date	е	Full name of contributor Kirk, V. Saundra	☐ out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/16/	/2011	Contributor address; C 2117 Clifton Street Austin, TX 78704	City; State; Zip Code		\$25.00 	
					(If travel outside of	Texas, complete Schedule T)
Princip	al occup	ation / Job title (See Instructions)	Employer (See Ins	structions)	
Date	,	Full name of contributor	out-of-state PAC (ID#) [Amount of	In-kind contribution
Date		Kitchen, Ann	3 out of state / > 10 (15 #	·/	contribution (\$)	description (if applicable)
02/12/	/2011	Contributor address; C 2401 Briargrove Austin, TX 78704	ity; State; Zip Code		 \$350.00 	
					(If travel outside of 1	Texas, complete Schedule T)
		ation / Job title (See Instructions		Employer (See Ins	tructions)	
Consu	iitant			Self		

The Instruct	TION GUIDE explains how to complete this form.		1 PAGE#	
THE MOTOUT	Tow dollar explains now to domplete this form.		Schedule: 25	5/53 Report: 27/70
2 FILER NAME	Morrison, Laura (Mrs.)		3 ACCOUNT#	(Ethics Commission filers)
			00000001	
4 Date	5 Full name of contributor out-of-state PAC (IDI	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
02/14/2011	6 Contributor address; City; State; Zip Code 1512 Pennsylvania Avenue Austin, TX 78702		\$50.00	Ι
			(If travel outside of	Texas, complete Schedule T)
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See In	estructions)	
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
02/22/2011	Contributor address; City; State; Zip Code 508 West 16th Street Austin, TX 78701		\$350.00	r
			(If travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)	Texas, complete ochloddis 1)
Principal		Frank Lam & As	ssociates, Inc.	
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/18/2011	Contributor address; City; State; Zip Code 1106 Upland Austin, TX 78741		\$25.00	
			<u> </u>	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In:	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
02/07/2011	Contributor address; City; State; Zip Code 1104 West 7th Street Austin, TX 78703		\$50.00	
				Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See Ins	structions)	
	Full name of contributor Out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Date	Lee, Carol			
Date 04/01/2011	Contributor address; City; State; Zip Code 3506 Far View Drive Austin, TX 78730		\$50.00 	
	Contributor address; City; State; Zip Code 3506 Far View Drive		1	「exas, complete Schedule T)

SCHEDULE A

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS 1 PAGE# The INSTRUCTION GUIDE explains how to complete this form.

			Schedule: 26	3/53 Report: 28/70
2 FILER NAME	Morrison, Laura (Mrs.)		3 ACCOUNT# 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID#Lee, Chien	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
02/22/2011	6 Contributor address; City; State; Zip Code 8303 Pommel Cove Austin, TX 78759		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occup Principal	pation / Job title (See Instructions)	10 Employer (See Ins Hejl, Lee & Asso		
Date	Full name of contributor ut-of-state PAC (ID# Lewis, Dawn	()	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/17/2011	Contributor address; City; State; Zip Code 4509 Edgemont Drive Austin, TX 78731		\$125.00	 -
		<u> </u>		Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See Ins	tructions)	
Date	Full name of contributor ut-of-state PAC (ID# Lewis, Fred)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/17/2011	Contributor address; City; State; Zip Code 4509 Edgemont Drive Austin, TX 78731	•	\$125.00 	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See Ins	tructions)	
Date	Full name of contributor ut-of-state PAC (ID#_Limon, Martha)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/02/2011	Contributor address; City; State; Zip Code 124 Juarez Cove Del Valle, TX 78617		\$350.00 	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions) lent	Employer (See Inst G. Limon Hauling		
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/18/2011	Contributor address; City; State; Zip Code 1807 Rhodes Road Apt 2 Austin, TX 78721		\$25.00 	
f		ĺ	•	
			(If travel outside of T	exas, complete Schedule T)

OTHER	THAN PLEDGES OR LOA	.NS		
The Instruct	ION GUIDE explains how to complete this form.	1 PAGE # Schedule: 27	7/53 Report: 29/70	
2 FILER NAME	Morrison, Laura (Mrs.)		3 ACCOUNT # 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (IE Linehan, Thomas)#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
02/22/2011	6 Contributor address; City; State; Zip Code 6005 Bullard Drive Austin, TX 78757		\$100.00	
_			<u> </u>	Texas, complete Schedule T)
9 Principal occu	pation / Job title (See instructions)	10 Employer (See In	structions)	-
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
02/23/2011	Contributor address; City; State; Zip Code 4809 Placid Place Austin, TX 78731		\$25.00	
			(If traval autoids of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	<u></u>	Texas, complete Schedule 1)
•			·	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/18/2011	Contributor address; City; State; Zip Code 6600 Mesa Drive Austin, TX 78731		\$150.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Judge	ation / Job title (See Instructions)	Employer (See Ins Travis County	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/21/2011	Contributor address; City; State; Zip Code 6600 Mesa Drive Austin, TX 78731		\$100.00 	
				Texas, complete Schedule T)
Principal occup Judge	ation / Job title (See Instructions)	Employer (See Ins Travis County	structions)	
Date	Full name of contributor ut-of-state PAC (ID# Little, Emily)	Amount of contribution (\$)	In-kind contribution description (if applicable)
02/08/2011	Contributor address; City; State; Zip Code 1001 East 8th Street Austin, TX 78702		 \$350.00 	
			<u> </u>	exas, complete Schedule T)
Principal occup Architect	ation / Job title (See Instructions)	Employer (See Ins Clayton & Little	tructions)	

OTHE	R THAN PLEDGES OR LOA	NS		
The Instruc	TION GUIDE explains how to complete this form.		1 PAGE# Schedule: 28	3/53 Report: 30/70
2 FILER NAME	Morrison, Laura (Mrs.)		3 ACCOUNT# 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor	D#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
03/07/2011	6 Contributor address; City; State; Zip Code 400 Academy Drive Austin, TX 78704		\$200.00	
		<u> </u>	<u> </u>	Texas, complete Schedule T)
9 Principal occu Realtor	ipation / Job title (See Instructions)	10 Employer (See In Self	nstructions)	
Date	Full name of contributor)#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/20/2011	Contributor address; City; State; Zip Code 725 Patterson Austin, TX 78703		\$100.00]
			(If travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/23/2011	Contributor address; City; State; Zip Code 2302 Del Curto Road Austin, TX 78704		\$350.00 	
			<u></u>	Texas, complete Schedule T)
Principal occu Community \	pation / Job title (See Instructions) /olunteer	Employer (See In None	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/01/2011	Contributor address; City; State; Zip Code 606 Harthan Street Austin, TX 78703		\$350.00 	
				Texas, complete Schedule T)
Principal occup Psychologist	pation / Job title (See Instructions)	Employer (See Ins Self	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/01/2011	Contributor address; City; State; Zip Code 606 Harthan Street Austin, TX 78703		\$350.00 <mark> </mark> 	
			<u> </u>	exas, complete Schedule T)
Principal occup Professor	pation / Job title (See Instructions)	Employer (See Ins University of Tex		

OTHER	THAN PLEDGES OR LOA	.NS 		
The Instruct	The Instruction Guide explains how to complete this form.			9/53 Report: 31/70
2 FILER NAME	Morrison, Laura (Mrs.)		3 ACCOUNT # 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID Malfaro, Louis)#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
02/25/2011	6 Contributor address; City; State; Zip Code 1510 East 11th Street Austin, TX 78702		\$100.00	 -
			(If travel outside of	Texas, complete Schedule T)
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See In	nstructions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/04/2011	Contributor address; City; State; Zip Code 2212 East Windsor Road Austin, TX 78703		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	I pation / Job title (See Instructions)	Employer (See In		Toxas, complete senedate ()
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
02/26/2011	Contributor address; City; State; Zip Code 2810 Townes Lane Austin, TX 78703		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In Environmental [
Date	Full name of contributor	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/02/2011	Contributor address; City; State; Zip Code 510 East 7th Street Houston, TX 77007		\$350.00 	
				Texas, complete Schedule T)
Principal occup **President	ation / Job title (See Instructions)	Employer (See Ins Texas Taxi, Inc.		
Date	Full name of contributor	<i>()</i>	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/18/2011	Contributor address; City; State; Zip Code 1611 Alameda Drive Austin, TX 78704		\$10.00 <mark> </mark> 	
			<u> </u>	exas, complete Schedule,T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)	

OTHER THAN PLEDGES OR LOANS					
The Instruct	TION GUIDE explains how to complete this form.		1 PAGE# Schedule: 30	0/53 Report: 32/70	
2 FILER NAME	Morrison, Laura (Mrs.)		3 ACCOUNT# 00000001	(Ethics Commission filers)	
4 Date	5 Full name of contributor ut-of-state PAC (ID Mathews, Elloa)#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
01/03/2011	6 Contributor address; City; State; Zip Code 2610 Friar Tuck Lane Austin, TX 78704		\$350.00	 	
			<u> </u>	Texas, complete Schedule T)	
9 Principal occu Retired	pation / Job title (See Instructions)	10 Employer (See In None	structions)		
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
01/18/2011	Contributor address; City; State; Zip Code 10463 Sprinkle Road Austin, TX 78754	•••••	\$100.00	[[[
			(If travel outside of	Texas, complete Schedule T)	
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)		
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
02/07/2011	Contributor address; City; State; Zip Code P.O. Box 510 Uvalde, TX 78802		\$350.00 		
= □				Texas, complete Schedule T)	
Principal occuș Retired	pation / Job title (See Instructions)	Employer (See Ins None	structions)		
Date	Full name of contributor	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
01/18/2011	Contributor address; City; State; Zip Code 3202 Sunny Lane Austin, TX 78731		\$25.00 <mark> </mark> 		
				Texas, complete Schedule T)	
Principal occup	eation / Job title (See Instructions)	Employer (See Ins	structions)		
Date	Full name of contributor	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
03/08/2011	Contributor address; City; State; Zip Code 4000 Pinckney Street Austin, TX 78723		\$100.00 <mark> </mark> 		
_				exas, complete Schedule T)	
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	tructions)		

Texas Ethics Co	mmission P.O.Box 120	070 Austin,	Texas 78711-2070) (512)4	63-5800 TDD 1-800-735-
	CAL CONTRIBUTE THAN PLEDGE		NS		SCHEDULE A
The Instruct	on Guide explains how to comple	ete this form,		1 PAGE # Schedule: 3°	1/53 Report: 33/70
2 FILER NAME	Morrison, Laura (Mrs.)			3 ACCOUNT # 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor D McCarver, James	out-of-state PAC (ID#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
02/23/2011	6 Contributor address; City 1719 Manor Road Austin, TX 78722	y; State; Zip Code		\$250.00	} []
				(If travel outside of	Texas, complete Schedule T)
9 Principal occur Social Anthro	pation / Job title (See Instructions) opologist		10 Employer (See In Self	estructions)	
Date	Full name of contributor McClellan, William	out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/28/2011	Contributor address; City 11 Sundown Parkway Austin, TX 78746	y; State; Zip Code		\$100.00	[
				(If travel outside of	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)		Employer (See In	structions)	
Date	Full name of contributor D	out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/17/2011	Contributor address; City 2316 Thrasher Lane Austin, TX 78741	; State; Zip Code		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)		Employer (See In:	structions)	
Date	Full name of contributor McGraw, Karen	out-of-state PAC (ID#_)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/18/2011	Contributor address; City; 4315 Avenue C Austin, TX 78751	; State; Zip Code		\$25.00 	
				(If travel outside of	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)		Employer (See Ins	atructions)	
Date	Full name of contributor McGray, Judith	out-of-state PAC (ID#_)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/15/2011	Contributor address; City; 5327 Western Hills Drive Austin, TX 78731	State; Zip Code		\$350.00 <mark> </mark> 	
					Texas, complete Schedule T)
Principal occupa Land Surveyo	ation / Job title (See Instructions) r		Employer (See Ins McGray & McGray		

P.O.Box 12070 POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS 1 PAGE# The INSTRUCTION GUIDE explains how to complete this form. Schedule: 32/53 Report: 34/70 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Morrison, Laura (Mrs.) 00000001 ut-of-state PAC (ID# 5 Full name of contributor In-kind contribution Date Amount of contribution (\$) description (if applicable) Meachum, Kurt 03/31/2011 6 Contributor address; City; State; Zip Code \$100.00 5103 Cedro Trail Austin, TX 78731 (if travel outside of Texas, complete Schedule T) 9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Full name of contributor ut-of-state PAC (ID# Amount of In-kind contribution Date contribution (\$) description (if applicable) Means, Bertha 03/31/2011 Contributor address; City; State; Zip Code \$100.00 7400 Valburn Drive Austin, TX 78731 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Amount of In-kind contribution contribution (\$) description (if applicable) Meisenbach, Albert Contributor address; 01/13/2011 City; State; Zip Code \$100.00 1800 San Gabriel Street Austin, TX 78701 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) In-kind contribution Full name of contributor ut-of-state PAC (ID#_ Date Amount of contribution (\$) description (if applicable) Meisenbach, Megan 01/13/2011 City; State; Zip Code Contributor address; \$100.00 1800 San Gabriel Street Austin, TX 78701 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor ut-of-state PAC (ID# Amount of In-kind contribution Date description (if applicable) contribution (\$) Menicucci, Margaret Contributor address; City; State; Zip Code \$25.00 03/03/2011 4600 Laurel Canyon Drive Austin, TX 78731 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

OTHER	THAN PLEDGES OR LOA	NS 		
The Instruct	וסא Guide explains how to complete this form.		1 PAGE# Schedule: 33	3/53 Report: 35/70
2 FILER NAME	Morrison, Laura (Mrs.)		3 ACCOUNT# 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
01/17/2011	6 Contributor address; City; State; Zip Code 1406 Kinney Avenue Austin, TX 78704		\$30.00	!
			(If travel outside of	Texas, complete Schedule T)
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See In:	structions)	
Date	Full name of contributor	<u>;</u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/04/2011	Contributor address; City; State; Zip Code 8204 Navidad Drive Austin, TX 78735		\$250.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Developer	pation / Job title (See Instructions)	Employer (See Ins Endeavor Real I		
Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/04/2011	Contributor address; City; State; Zip Code 8204 Navidad Drive Austin, TX 78735		\$250.00	
			<u> </u>	Texas, complete Schedule T)
Principal occup Homemaker	nation / Job title (See Instructions)	Employer (See Ins None	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/24/2011	Contributor address; City; State; Zip Code 3802 Avenue H Austin, TX 78751		\$350.00	
Principal occup Retired	ation / Job title (See Instructions)	Employer (See Ins None	<u>'</u>	Texas, complete Schedule T)
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/15/2011	Contributor address; City; State; Zip Code 4205 Ramsey Avenue Austin, TX 78756		\$100.00 <mark> </mark> 	
	-		(If travel outside of T	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Insi	tructions)	

OTHE	R THAN PLEDGES OR LOA	NS 		
The Instruct	rion Guide explains how to complete this form.		1 PAGE# Schedule: 34	1/53 Report: 36/70
2 FILER NAME	Morrison, Laura (Mrs.)		3 ACCOUNT # 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID Mueller, Robert	#)	7 Amount of contribution (\$)	8
02/16/2011	6 Contributor address; City; State; Zip Code 605 West 10th Street Austin, TX 78701		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See Ir	nstructions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/21/2011	Contributor address; City; State; Zip Code 901 South Mopac Expressway Suite 100 Austin, TX 78746	• • • • • • • • • • • • • • • • • • • •	\$25.00	
		<u> </u>		Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/04/2011	Contributor address; City; State; Zip Code 3327 Far View Drive Austin, TX 78730		\$350.00	
		-	(If travel outside of	Texas, complete Schedule T)
Principal occup None	pation / Job title (See Instructions)	Employer (See In None	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/18/2011	Contributor address; City; State; Zip Code 1921 Elysian Fields Austin, TX 78727		\$50.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See Inc	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/18/2011	Contributor address; City; State; Zip Code 3816 South Lamar Boulevard Apt. 3003		\$100.00	
	Austin, TX 78704		l (If travel outside of l	Fexas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)	

OTHER	R THAN PLEDGES OR LOA	.NS 		
The Instruct	ION GUIDE explains how to complete this form.		1 PAGE # Schedule: 35	5/53 Report: 37/70
2 FILER NAME	Morrison, Laura (Mrs.)		3 ACCOUNT# 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID Orange, Margit)#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
02/02/2011	6 Contributor address; City; State; Zip Code 8806 Point West Drive Austin, TX 78759		\$50.00]
			(If travel outside of	Texas, complete Schedule T)
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/02/2011	Contributor address; City; State; Zip Code 604 Academy Drive Austin, TX 78704		\$50.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/18/2011	Contributor address; City; State; Zip Code 1701 East 21st Street Austin, TX 78722	. , , , , , , , , , , , , , , , , , , ,	\$50.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
02/12/2011	Contributor address; City; State; Zip Code 1311 Newton Street Austin, TX 78704		\$25.00 	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/18/2011	Contributor address; City; State; Zip Code 4601 Grand Cypress Drive Austin, TX 78747		\$20.00 	
			(If travel outside of T	exas, complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employer (See Ins	tructions)	

Texas Ethics Commission P.O.Box 12070 POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS 1 PAGE# The INSTRUCTION GUIDE explains how to complete this form. Schedule: 36/53 Report: 38/70 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Morrison, Laura (Mrs.) 00000001 5 Full name of contributor ut-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Perez, Refugia 03/31/2011 6 Contributor address; City; State; Zip Code \$350.00 16621 Hamilton Point Manor, TX 78653 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) ***President Perez Electrical Service Date Full name of contributor ut-of-state PAC (ID# Amount of In-kind contribution contribution (\$) description (if applicable) Pinnelli, Janis 01/12/2011 Contributor address; City; State; Zip Code \$350.00 P.O. Box 50038 Austin, TX 78763 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Accountant J. Pinnelli Co. Date Amount of In-kind contribution contribution (\$) description (if applicable) Pinnelli, Joe Contributor address; City; State; Zip Code 01/12/2011 \$350.00 P.O. Box 50038 Austin, TX 78763 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) J. Pinnelli Co. General Contractor Full name of contributor ut-of-state PAC (ID# Amount of In-kind contribution Date contribution (\$) description (if applicable) Placek, Beth 01/18/2011 Contributor address: City; State; Zip Code \$15.00 2311 Indian Trail Austin, TX 78703 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor ut-of-state PAC (ID# In-kind contribution Date Amount of contribution (\$) description (if applicable) Price, Cenda 02/25/2011 Contributor address; City; State; Zip Code \$50.00 2103 Glendale Piace Austin, TX 78704 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

P.O.Box 12070 Texas Ethics Commission Austin, Texas 78711-2070 (512)463-5800 POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS 1 PAGE# The Instruction Guide explains how to complete this form. Schedule: 37/53 Report: 39/70 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Morrison, Laura (Mrs.) 00000001 4 5 Full name of contributor ut-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Price Todd, Wendy 03/08/2011 6 Contributor address; City; State; Zip Code \$100.00 709 East Monroe Street Austin, TX 78704 (If travel outside of Texas, complete Schedule T) 9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Date Full name of contributor ut-of-state PAC (ID#_ Amount of In-kind contribution description (if applicable) contribution (\$) Ratliff, Gay 01/01/2011 Contributor address; City; State; Zip Code \$350.00 3509 Hampton Road Austin, TX 78705 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Principal Gay Ratliff Interior Design Date Amount of In-kind contribution contribution (\$) description (if applicable) Reddi, Udaya 02/22/2011 Contributor address: City; State; Zip Code \$350.00 10505 Yucca Drive Austin, TX 78759 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Engineer Seif Full name of contributor ut-of-state PAC (ID#_ In-kind contribution Date Amount of contribution (\$) description (if applicable) Reid, Susan 02/25/2011 Contributor address; City; State; Zip Code \$100.00 1104 Wayside Drive Austin, TX 78703 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor ut-of-state PAC (ID# Amount of In-kind contribution Date contribution (\$) description (if applicable)

Rice, Chuck

Principal occupation / Job title (See Instructions)

909 Garner Avenue Austin, TX 78704

Contributor address; City; State; Zip Code

01/04/2011

Government Relations

Electronic Filing Version 3.4.1

(If travel outside of Texas, complete Schedule T)

\$350.00

Employer (See Instructions)

Chuck Rice Group

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS 1 PAGE# The Instruction Guide explains how to complete this form. Schedule: 38/53 Report: 40/70 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Morrison, Laura (Mrs.) 00000001 ut-of-state PAC (ID# 5 Full name of contributor In-kind contribution Date Amount of contribution (\$) description (if applicable) Rice, Jennifer 6 Contributor address: City: State: Zip Code 01/04/2011 \$350.00 909 Garner Avenue Austin, TX 78704 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Director of Development Texas Cultural Trust Amount of In-kind contribution Date contribution (\$) description (if applicable) Richards, Ham 01/02/2011 Contributor address; City; State; Zip Code \$100.00 7102 Coachwhip Hollow Austin, TX 78750 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor ut-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Richards, Joanne 01/02/2011 Contributor address; City; State; Zip Code \$100.00 7102 Coachwhip Hollow Austin, TX 78750 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor ut-of-state PAC (ID#_ In-kind contribution Date Amount of contribution (\$) description (if applicable) Rigby, Alton 01/18/2011 Contributor address; City; State; Zip Code \$150.00 1918 West 40th Street Austin, TX 78731 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor ut-of-state PAC (ID#_ Amount of In-kind contribution contribution (\$) description (if applicable) Roa, Ruby \$50.00 01/18/2011 Contributor address; City; State; Zip Code 611 Terrell Hill Drive Austin, TX 78704 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

OTHER	R THAN PLEDGES OR LOA	NS		
The Instruct	ION GUIDE explains how to complete this form.		1 PAGE # Schedule: 39	9/53 Report: 41/70
2 FILER NAME	Morrison, Laura (Mrs.)		3 ACCOUNT # 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID Robbins, Paul)#)	7 Amount of contribution (\$)	8
01/01/2011	6 Contributor address; City; State; Zip Code P.O. Box 1374 Austin, TX 78767		\$25.00	! !
			(If travel outside of	Texas, complete Schedule T)
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/22/2011	Contributor address; City; State; Zip Code 2614 Pembrooke Trait Austin, TX 78731		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Professor	pation / Job title (See Instructions)	Employer (See In University of Te		
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/22/2011	Contributor address; City; State; Zip Code 2614 Pembrooke Trail Austin, TX 78731		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Artist	ation / Job title (See Instructions)	Employer (See Ins Self	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/29/2011	Contributor address; City; State; Zip Code 3400 Montrose Austin, TX 78705		\$50.00 	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)	
Date	Full name of contributor ut-of-state PAC (ID# Rosato, John	<u>'</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/13/2011	Contributor address; City; State; Zip Code P.O. Box 50164 Austin, TX 78763		ا \$200.00 	
į			(If travel outside of	Texas, complete Schedule T)
Principal occup Real Estate	ation / Job title (See Instructions)	Employer (See Ins Southwest Strate		

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 (512)463-5800 POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS 1 PAGE# The INSTRUCTION GUIDE explains how to complete this form. Schedule: 40/53 Report: 42/70 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Morrison, Laura (Mrs.) 00000001 Date 5 Full name of contributor ut-of-state PAC (ID# In-kind contribution Amount of contribution (\$) description (if applicable) Salinas, Trey 04/04/2011 6 Contributor address; City; State; Zip Code \$25.00 1221 South Mopac Expressway Suite 365 Austin, TX 78746 (If travel outside of Texas, complete Schedule T) 9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Date Full name of contributor ut-of-state PAC (ID# In-kind contribution Amount of contribution (\$) description (if applicable) Schotz, Bennett 04/01/2011 Contributor address: City; State; Zip Code \$150.00 1711 San Gabriel Street Austin, TX 78701 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor ut-of-state PAC (ID#_ Amount of In-kind contribution contribution (\$) description (if applicable) Seeger, Patricia 02/26/2011 Contributor address; City; State; Zip Code \$350.00 6705 Winterberry Drive Austin, TX 78750 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Self In-kind contribution Date Amount of contribution (\$) description (if applicable) Sepulveda, Eugene Contributor address; City; State; Zip Code 02/21/2011 \$350.00 3114 Wheeler Street Austin, TX 78705 (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) CEO Entrepreneurs Foundation of Central Texas Date Amount of In-kind contribution contribution (\$) description (if applicable) Shapiro, Bobby Lee Contributor address; City; State; Zip Code 03/02/2011 \$250.00 42 Sundown Parkway Austin, TX 78746 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Austin Metal & Iron President

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

The Instruct	ION GUIDE explains how to complete this form.		1 PAGE# Schedule: 41	1/53 Report: 43/70
2 FILER NAME	Morrison, Laura (Mrs.)		3 ACCOUNT# 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
03/02/2011	6 Contributor address; City; State; Zip Code 108 Woodview Court Austin, TX 78746		\$250.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occu Secretary	pation / Job title (See Instructions)	10 Employer (See In Austin Metal &		
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/18/2011	Contributor address; City; State; Zip Code 209 Krebs Lane Austin, TX 78704		\$40.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In:	<u> </u>	
Date	Full name of contributor	<u>;</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/01/2011	Contributor address; City; State; Zip Code 2210 Windsor Road Austin, TX 78703		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See Ins	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/18/2011	Contributor address; City; State; Zip Code 1403 Kenwood Avenue Austin, TX 78704		\$50.00 	
	•		(If travel outside of	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)	
Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
03/02/2011	Contributor address; City; State; Zip Code 5006 Walnut Cove Drive Houston, TX 77084		 00.000 	
			(If travel outside of 1	exas, complete Schedule T)
Principal occup **Co-Presider	ation / Job title (See Instructions) ht	Employer (See Ins Yellow Cab Hous		

OTHER	R THAN PLEDGES OR LOA	NS 		<u></u>
The Instruct	ION GUIDE explains how to complete this form.		1 PAGE# Schedule: 42	2/53 Report: 44/70
2 FILER NAME	Morrison, Laura (Mrs.)		3 ACCOUNT # 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID Skinner, Willie	#)	7 Amount of contribution (\$)	8
03/02/2011	6 Contributor address; City; State; Zip Code 5006 Walnut Cove Drive Houston, TX 77084	•••••	\$350.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occu **Consultant	pation / Job title (See Instructions)	10 Employer (See In Self	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/18/2011	Contributor address; City; State; Zip Code 611 Oakland Avenue Austin, TX 78703		\$25.00	<u> </u>
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor ut-of-state PAC (ID# Smith, David	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/09/2011	Contributor address; City; State; Zip Code P.O. Box 537 Austin, TX 78767		\$25.00 	
Division	ation / Job title (See Instructions)			Texas, complete Schedule T)
Principal occup	ation / Job title (See instructions)	Employer (See Ins	structions)	
Date	Full name of contributor ut-of-state PAC (ID# Smith, Karen)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/03/2011	Contributor address; City; State; Zip Code 2120 Barton Hills Drive Austin, TX 78704		\$100.00 	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	tructions)	
Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
01/18/2011	Contributor address; City; State; Zip Code 209 Krebs Lane Austin, TX 78704		\$20.00 <mark> </mark> 	
			<u> </u>	exas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	tructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

	THAN I LLDGLG ON LOA		<u> </u>	
The Instructi	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 43	3/53 Report: 45/70
2 FILER NAME	Morrison, Laura (Mrs.)		3 ACCOUNT # 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID: Soeur, Channy	#)	7 Amount of contribution (\$)	8
02/22/2011	6 Contributor address; City; State; Zip Code 2004 East Gann Hill Drive Cedar Park, TX 78613		\$350.00	
_			(If travel outside of	Texas, complete Schedule T)
9 Principal occup CEO	pation / Job title (See Instructions)	10 Employer (See In CAS Consulting	structions) g & Services, Inc.	
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
02/22/2011	Contributor address; City; State; Zip Code 2004 East Gann Hill Drive Cedar Park, TX 78613		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Office Manag	ation / Job title (See Instructions) er	Employer (See In CAS Consulting	structions) & Services, Inc.	
Date	Full name of contributor)	Amount of contribution (\$)	fn-kind contribution description (if applicable)
01/01/2011	Contributor address; City; State; Zip Code 802 Norwalk Lane Austin, TX 78703		\$25.00	
			(If travel outside of	Texas, complete Schedule T)
Principat occup	ation / Job title (See Instructions)	Employer (See Ins	structions)	
Date	Full name of contributor ut-of-state PAC (ID# Souhami, Gloria)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/01/2011	Contributor address; City; State; Zip Code 802 Norwalk Lane Austin, TX 78703		\$100.00 	
			(If travel outside of	Texas, complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employer (See Ins	tructions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/08/2011	Contributor address; City; State; Zip Code 1225 Corona Austin, TX 78723		\$25.00 <mark> </mark> 	
_	<u> </u>		(If travel outside of	Texas, complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employer (See Ins	tructions)	
				ļ

Principal occupation / Job title (See Instructions)

Austin, Texas 78711-2070 (512)463-5800 TDD 1-800-735-2989 Texas Ethics Commission P.O.Box 12070 **POLITICAL CONTRIBUTIONS** SCHEDULE A OTHER THAN PLEDGES OR LOANS 1 PAGE# The Instruction Guide explains how to complete this form. Schedule: 44/53 Report: 46/70 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Morrison, Laura (Mrs.) 00000001 Full name of contributor ☐ out-of-state PAC (ID#) In-kind contribution Date Amount of contribution (\$) description (if applicable) St. Romain, Malcolm 01/07/2011 6 Contributor address; City; State; Zip Code \$100.00 2711 Greenlawn Parkway Austin, TX 78757 (If travel outside of Texas, complete Schedule T) 9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Date Amount of In-kind contribution contribution (\$) description (if applicable) Stein, Brad \$100.00 03/07/2011 Contributor address; City; State; Zip Code 4108 Firstview Drive Austin, TX 78731 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor ut-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Stern, Lonny Contributor address; 01/18/2011 City; State; Zip Code \$25.00 2929A East 13th Street Austin, TX 78702

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Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor ut-of-state PAC (ID#_Stringer, Bob)	Amount of contribution (\$)	In-kind contribution description (if applicable)
02/28/2011	Contributor address; City; State; Zip Code 1916 David Street Austin, TX 78705		\$250.00 	
			(If travel outside of To	exas, complete Schedule T)
Principal occup Retired	pation / Job title (See Instructions)	Employer (See In None	structions)	
Date	Full name of contributor ut-of-state PAC (ID#_Sullivan, Mike		Amount of contribution (\$)	In-kind contribution description (if applicable)
01/17/2011	Contributor address; City; State; Zip Code 1613 West 9 1/2 Street Austin. TX 78703		\$100.00	

Employer (See Instructions)

(If travel outside of Texas, complete Schedule T)

OTHER	THAN PLEDGES OR LOA			
The Instruct	יוסא Guide explains how to complete this form.		1 PAGE# Schedule: 45	/53 Report: 47/70
2 FILER NAME	Morrison, Laura (Mrs.)		3 ACCOUNT# 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID Sumner, Gardner	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
01/18/2011	6 Contributor address; City; State; Zip Code 1610 Treadwell Street Austin, TX 78704		\$15.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See In	nstructions)	· ·
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/18/2011	Contributor address; City; State; Zip Code 906 West 17th Street Austin, TX 78701		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In		
Date	Full name of contributor	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/18/2011	Contributor address; City; State; Zip Code P.O. Box 29734 Austin, TX 78755		\$100.00	
			<u> </u>	fexas, complete Schedule T)
Principal occup n/a	pation / Job title (See Instructions)	Employer (See In NOTE: CONTR		NED APRIL 14, 2011
Date	Full name of contributor ☐ out-of-state PAC (ID≴ Team, Linda)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/02/2011	Contributor address; City; State; Zip Code 600 Bellevue Place Austin, TX 78705		 \$200.00 	
			(If travel outside of T	exas, complete Schedule T)
Principal occup Real Estate	vation / Job title (See Instructions)	Employer (See Ins Self	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/02/2011	Contributor address; City; State; Zip Code 919 Congress Avenue Suite 1500 Austin, TX 78701		\$350.00 	
	attack to the Constant of the			exas, complete Schedule T)
Principal occup **n/a	ation / Job title (See Instructions)	Employer (See Ins n/a	structions)	

OTHER	R THAN PLEDGES OR LOA	NS		
The Instruct	ION GUIDE explains how to complete this form.		1 PAGE# Schedule: 46	6/53 Report: 48/70
2 FILER NAME	Morrison, Laura (Mrs.)		3 ACCOUNT# 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID Texas Working Families PAC	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
03/28/2011	6 Contributor address; City; State; Zip Code 1114 St. Mary's Suite 106		\$350.00	
	San Antonio, TX 78210	•	(If travel outside of	Texas, complete Schedule T)
9 Principal occu n/a	pation / Job title (See Instructions)	10 Employer (See In n/a	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/31/2011	Contributor address; City; State; Zip Code 1510 Aggie Lane Austin, TX 78757	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$250.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Attorney	pation / Job title (See Instructions)	Employer (See In McGinnis, Loch	structions) ridge, and Kilgore	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/22/2011	Contributor address; City; State; Zip Code 3203 Cupid Drive Austin, TX 78735		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Project Mana	ation / Job title (See Instructions) ger	Employer (See In Barly & Pfeiffer		
Date	Full name of contributor	<i>‡</i>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/09/2011	Contributor address; Cíty; State; Zip Code 1004 Elm Street Austin, TX 78703		\$350.00 	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Vice Presider	ation / Job title (See Instructions) it	Employer (See Ins Texas Highway	,	
Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/18/2011	Contributor address; City; State; Zip Code 2106 East Martin Luther King Jr. Boulevard Austin, TX 78702		\$25.00 	
			(If travel outside of 1	exas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	tructions)	

Texas Ethics Commission P.O.Box 12070 POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS 1 PAGE# The Instruction Guide explains how to complete this form. Schedule: 47/53 Report: 49/70 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Morrison, Laura (Mrs.) 00000001 ut-of-state PAC (ID#_ 4 Date 5 Full name of contributor Amount of In-kind contribution contribution (\$) description (if applicable) Toming, Rhonda 04/04/2011 6 Contributor address; City; State; Zip Code \$25.00 1221 South Mopac Expressway Suite 365 Austin, TX 78746 (If travel outside of Texas, complete Schedule T) 9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Amount of Date In-kind contribution contribution (\$) description (if applicable) Tomlinson, Steven 02/21/2011 Contributor address; City; State; Zip Code \$350.00 3114 Wheeler Street Austin, TX 78705 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Professor Acton MBA School Date Full name of contributor ut-of-state PAC (ID# Amount of In-kind contribution contribution (\$) description (if applicable) Triager, Jeff 02/08/2011 Contributor address; City; State; Zip Code \$350.00 3106 Lookout Lane Austin, TX 78746 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) La Corsha Hospitality Group President In-kind contribution Date Amount of contribution (\$) description (if applicable) Tuerff, Kevin Contributor address; 01/17/2011 City; State; Zip Code \$100.00 101 Colorado Street #2304 Austin, TX 78701 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor ut-of-state PAC (ID# Amount of In-kind contribution Date contribution (\$) description (if applicable) Uribe, Hector Contributor address: City; State; Zip Code \$100.00 02/25/2011 1105 Elm Street Austin, TX 78703 (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions)

Austin, Texas 78711-2070 Texas Ethics Commission P.O.Box 12070 (512)463-5800 POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS 1 PAGE# The INSTRUCTION GUIDE explains how to complete this form. Schedule: 48/53 Report: 50/70 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Morrison, Laura (Mrs.) 00000001 ut-of-state PAC (ID#_ Amount of Date 5 Full name of contributor In-kind contribution contribution (\$) description (if applicable) Vandermeulen, Kurt 01/18/2011 6 Contributor address; City; State; Zip Code \$100.00 3510 Wendel Cove Mailbox #10 Austin, TX 78731 (If travel outside of Texas, complete Schedule T) 10 Employer (See Instructions) 9 Principal occupation / Job title (See Instructions) Date Full name of contributor ut-of-state PAC (ID# Amount of In-kind contribution contribution (\$) description (if applicable) Vickers, Lee Contributor address; City; State; Zip Code 01/19/2011 \$200.00 600 Congress Avenue Suite 500 Austin, TX 78701 (if travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Martinec, Winn, Vickers & McElroy, P.C. Attorney Amount of In-kind contribution contribution (\$) description (if applicable) Volkening, Ronnie 01/18/2011 Contributor address; City; State; Zip Code \$100.00 8546 Adirondack Trail Apartment 7 Austin, TX 78759 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Amount of In-kind contribution contribution (\$) description (if applicable) Wahlberg, David Contributor address; City; State; Zip Code 03/09/2011 \$50.00 1208 West Avenue Austin, TX 78701 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor ut-of-state PAC (ID# Amount of In-kind contribution contribution (\$) description (if applicable) Walker, Nancy Contributor address; City; State; Zip Code 01/18/2011 \$50.00 5710 Abilene Trail Austin, TX 78749 (If travel outside of Texas, complete Schedule T)

Employer (See Instructions)

Principal occupation / Job title (See Instructions)

OTHER	R THAN PLEDGES OR LOA	NS 		
The Instruct	ION GUIDE explains how to complete this form.		1 PAGE# Schedule: 49	0/53 Report: 51/70
2 FILER NAME	Morrison, Laura (Mrs.)		3 ACCOUNT:# 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID Walton, Cory	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
01/18/2011	6 Contributor address; City; State; Zip Code 1701 Bouldin Avenue Austin, TX 78704		\$200.00	
			(If travel outside of	Texas, complete Schedule T)
	pation / Job title (See Instructions) munications Specialist	10 Employer (See In Emerson Proce	structions) ss Management	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/30/2011	Contributor address; City; State; Zip Code 608 Harthan Street Austin, TX 78703		\$25.00	
	Austri, 17,70703		(If travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In:	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/25/2011	Contributor address; City; State; Zip Code 2218 Alta Vista Avenue Austin, TX 78704		\$100.00	
				Texas, complete Schedule T)
Principal occuş	pation / Job title (See Instructions)	Employer (See Ins	structions)	
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/15/2011	Contributor address; City; State; Zip Code 704 West Gibson Street Austin, TX 78704		\$50.00 	
			(If travel outside of 1	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	tructions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/16/2011	Contributor address; City; State; Zip Code 802 Long Bow Lane Austin, TX 78704		\$350.00 <mark> </mark> I	
			·	exas, complete Schedule T)
Principal occup Programmer	ation / Job title (See Instructions)	Employer (See Ins Nokia	tructions)	

OTHER	R THAN PLEDGES OR LOA	NS		
The Instruct	ION GUIDE explains how to complete this form.		1 PAGE# Schedule: 50)/53 Report: 52/70
2 FILER NAME	Morrison, Laura (Mrs.)		3 ACCOUNT# 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID Whatley, Bart	#)	7 Amount of contribution (\$)	8
01/18/2011	6 Contributor address; City; State; Zip Code 907 East 37th Street Austin, TX 78705		\$150.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See In	nstructions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/18/2011	Contributor address; City; State; Zip Code 7901 Spicewood Springs Road Austin, TX 78759	• • • • • • • • • • • • • • • • • • • •	\$100.00	 -
		_	(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/03/2011	Contributor address; City; State; Zip Code 4600 Laurel Canyon Drive Austin, TX 78731		\$25.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)	
Date	Full name of contributor out-of-state PAC (ID# Whitlow, Elizabeth)	Amount of contribution (\$)	In-kind contribution description (if applicable)
02/22/2011	Contributor address; City; State; Zip Code P.O. Box 300846 Austin, TX 78703		\$10.00 I	
				Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)	,
Date	Full name of contributor	}	Amount of contribution (\$)	In-kind contribution description (if applicable)
02/07/2011	Contributor address; City; State; Zip Code 4428 Gillis Street Austin, TX 78745		\$100.00 	
1			(If travel outside of 1	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	<u> </u>	

Real Estate Broker

TDD 1-800-735-2989 Texas Ethics Commission P.O.Box 12070 POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS 1 PAGE# The INSTRUCTION GUIDE explains how to complete this form. Schedule: 51/53 Report: 53/70 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Morrison, Laura (Mrs.) 00000001 In-kind contribution Date Amount of contribution (\$) description (if applicable) Williams, Chad 03/30/2011 6 Contributor address; City; State; Zip Code \$100.00 7500 Greenhaven Drive Austin, TX 78757 (If travel outside of Texas, complete Schedule T) 9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) In-kind contribution Date Amount of contribution (\$) description (if applicable) Williams, Jonathan 02/10/2011 Contributor address; City; State; Zip Code \$50.00 3012 West Avenue Austin, TX 78705 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Amount of In-kind contribution contribution (\$) description (if applicable) Williams, Lemuel 01/18/2011 Contributor address; City; State; Zip Code \$75.00 11200 Old Quarry Road Austin, TX 78717 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) In-kind contribution Date Amount of contribution (\$) description (if applicable) Wilson, Stacy 04/04/2011 Contributor address; City; State; Zip Code \$50.00 114 Valley Circle San Marcos, TX 78666 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Amount of in-kind contribution contribution (\$) description (if applicable) Winetroub, Jerald Contributor address; 03/30/2011 City; State; Zip Code \$350.00 515 Congress Avenue Suite 1790 Austin, TX 78701 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

Jerald Winetroub Company

OTHER	R THAN PLEDGES OR LOA	NS		
The Instruct	ION GUIDE explains how to complete this form.		1 PAGE# Schedule: 52	2/53 Report: 54/70
2 FILER NAME	Morrison, Laura (Mrs.)		3 ACCOUNT# 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID Winetroub, Sandra	#)	7 Amount of contribution (\$)	8
03/30/2011	6 Contributor address; City; State; Zip Code 515 Congress Avenue Suite 1790		\$350.00	[
	Austin, TX 78701		(If travel outside of	Texas, complete Schedule T)
9 Principal occup None	pation / Job title (See Instructions)	10 Employer (See In None	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
02/26/2011	Contributor address; City; State; Zip Code 1104 Enfield Drive Austin, TX 78703		\$200.00	! ! !
			(If travel outside of	Texas, complete Schedule T)
Principal occup Real Estate	pation / Job title (See Instructions)	Employer (See In: Self	structions)	
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/12/2011	Contributor address; City; State; Zip Code 4811 Allison Cove Austin, TX 78741		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Consultant	ation / Job title (See Instructions)	Employer (See Ins IBM	structions)	
Date	Full name of contributor	<u>'</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
02/09/2011	Contributor address; City; State; Zip Code 5507 Lemonwood Austin, TX 78731		\$50.00 	
			<u> </u>	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	tructions)	
Date	Full name of contributor ut-of-state PAC (ID# Zvinakis, Kristina		Amount of contribution (\$)	In-kind contribution description (if applicable)
03/22/2011	Contributor address; City; State; Zip Code 1122 Colorado Street Unit 1310 Austin, TX 78701		\$25.00 <mark> </mark> 	
			·	exas, complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employer (See Ins	tructions)	

	rion Guide explains how to complete this forn	n.	1 PAGE# Schedule: 53/53 Report: 55/70
FILER NAME	Morrison, Laura (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00000001
Date	5 Full name of contributor ut-of-stat zwilling, Marcia	e PAC (ID#)	7 Amount of 8 In-kind contribution contribution (\$) description (if applicable
03/07/2011	6 Contributor address; City; State; 8702 Bluff Springs Road Austin, TX 78744	Zip Code	\$100.00
			(If travel outside of Texas, complete Schedule T)
Principal occu	ipation / Job title (See Instructions)	10 Employer (See In	nstructions)

EXPENDITURE CATEGORIES

POLITICAL EXPENDITURES

SCHEDULE F

Advertising Expense Accounting/Banking Event Expense

to benefit C/OH

Gifts/Awards/Memorial Expense Legal Services

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

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

Food/Beverage Expense Polling Expense Printing Expense Consulting Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 PAGE# 2 FILER NAME 3 ACCOUNT # (TEC filers) Morrison, Laura (Mrs.) Schedule: 1/14 Report: 56/70 00000001 4 Date 5 Payee name Adjavon, Tsoke 03/09/2011 6 Amount (\$) Payee address City; State; Zip Code 916 Rochester Castle Way \$108.00 Pflugerville, TX 78660 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 **PURPOSE** Advertising Expense Ads in newsletter OF **EXPENDITURE** 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 01/01/2011 Badgley, Shawn Payee address Amount (\$) City: State: Zip Code 1005 Edgecliff Terrace Austin, TX 78704 \$1,750.00 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Salaries/Wages/Contract Labor Salary OF EXPENDITURE Office sought: Complete ONLY if Candidate / Officeholder name Office held: direct expenditure to benefit C/OH Date Payee name Badgley, Shawn 01/20/2011 Payee address Amount (\$) City; State; Zip Code 1005 Edgecliff Terrace \$1,750.00 Austin, TX 78704 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Salaries/Wages/Contract Labor Salary **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Badgley, Shawn 02/01/2011 City; State; Amount (\$) Payee address Zip Code 1005 Edgecliff Terrace \$1,750.00 Austin, TX 78704 Description Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) **PURPOSE** Salaries/Wages/Contract Labor Salary EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure

SCHEDULE F

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor

Loan Repayment/Reimbursement

Consulting Expe Event Expense Fees		nsportation Equipment & Related Expense intributions/Donations Made By Candidate/Officeholder/Political Committee HER (enter a category not listed above)	
1 PAGE#	2 FILER NAME	· · -	3 ACCOUNT # (TEC filers)
Schedule: 2/14 F	Report: 57/70 Morrison, Laura (Mrs.)		0000001
4 Date 02/18/2011	5 Payee name Badgley, Shawn		
6 Amount (\$)	7 Payee address City; State; Zip Coo	de	
\$1,750.00	1005 Edgecliff Terrace Austin, TX 78704		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sche Salaries/Wages/Contract Labor	dule) (b) Description (if translated Salary	vel outside of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
03/01/2011	Badgley, Shawn		
Amount (\$)	Payee address City; State; Zip Cod	de	
\$1,750.00	1005 Edgecliff Terrace Austin, TX 78704		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sched Salaries/Wages/Contract Labor	dule) Description (If trav Salary	rel outside of Texas, complete Schedule T)
i			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 03/21/2011	Payee name Badgley, Shawn		
Amount (\$) \$1,750.00	Payee address City; State; Zip Cod 1005 Edgecliff Terrace Austin, TX 78704	e	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sched Salaries/Wages/Contract Labor	dule) Description (If trav Salary	el outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name	, , , , , , , , , , , , , , , , , , , 	
03/28/2011	Black, Kevin		
Amount (\$)	Payee address City; State; Zip Code	e	
\$316.25	4606 Bennett Avenue Austin, TX 78751		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sched Salaries/Wages/Contract Labor	lule) Description (If trave Salary	al outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

Loan Repayment/Reimbursement

EXPENDITURE CATEGORIES

POLITICAL EXPENDITURES

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

direct expenditure to benefit C/OH

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

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

Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Fees Printing Expense Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. 1 PAGE# 2 FILER NAME 3 ACCOUNT # (TEC filers) Morrison, Laura (Mrs.) Schedule: 3/14 Report: 58/70 0000001 4 Date 5 Payee name Capital Area Asian American Democrats 02/03/2011 6 Amount (\$) 7 Payee address City: State: Zip Code P.O. Box 4560 \$100.00 Austin, TX 78765 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 **PURPOSE** Contributions/Donations Made By Event Sponsorship OF Candidate/Officeholder/Political Committee EXPENDITURE 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 01/05/2011 Capitol Rubber Stamp Payee address State; Zip Code Amount (\$) City; 3314 South Congress Avenue \$10.28 Austin, TX 78704 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE Printing Expense Name Badge OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office held: Office sought: direct expenditure to benefit C/OH Date Payee name 03/21/2011 Central Texas Democratic Forum City; State; Zip Code Amount (\$) Payee address 816 Congress Avenue \$50.00 Suite 700 Austin, TX 78701 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** Contributions/Donations Made By **Event Sponsorship** Candidate/Officeholder/Political Committee **EXPENDITURE** Complete ONLY if Office held: Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH Date Payee name Checkmark Typesetting 02/03/2011 Amount (\$) Payee address City; State; Zip Code 3217 N IH-35 \$1,257.87 Austin, TX 78722 Category (See Categories listed at the top of this schedule) (if travel outside of Texas, complete Schedule T) **PURPOSE Printing Expense** Bumper stickers, lapel stickers, sponsor boards OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held:

SCHEDULE F

Advertising Expense

Gifts/Awards/Memorial Expense

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor

Loan Repayment/Reimbursement

Accounting/Ban Consulting Expe Event Expense Fees	ense Food/Beverage Expense Tra Polling Expense Tra Printing Expense Offi	citation/Fundraising Expense vel In District vel Out Of District ce Overhead/Rental Expense xplains how to complete this for	Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) m.
1 PAGE#	2 FILER NAME		3 ACCOUNT # (TEC filers)
Schedule: 4/14			00000001
4 Date	5 Payee name Checkmark Typesetting		
03/21/2011 6 Amount (\$)	7 Payee address City; State; Zip C		<u> </u>
F -	1.	ode	
\$6,777.63	Austin, TX 78722		
8 PURPOSE	(a) Category (See Categories listed at the top of this so	' I''	(If travel outside of Texas, complete Schedule T)
OF	Printing Expense	Yard Signs a	nd Road Signs
EXPENDITURE			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office soug	pht: . Office held:
Date	Payee name		
03/04/2011	Craigslist.org		
Amount (\$)	Payee address City; State; Zip C	ode	
\$25.00	1381 9th Avenue San Francisco, CA 94122		
PURPOSE	Category (See Categories listed at the top of this sci Advertising Expense	nedule) Description (Advertisemen	If travel outside of Texas, complete Schedule T)
OF EXPENDITURE			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office soug	ht: Office held:
Date 03/09/2011	Payee name FedEx Office		
Amount (\$)	Payee address City; State; Zip Co	ode	
\$99.59	2901 Medical Arts Street Austin, TX 78705		
PURPOSE OF	Category (See Categories listed at the top of this sch Printing Expense	edule) Description (Maps	If travel outside of Texas, complete Schedule T)
EXPENDITURE			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office soug	ht; Office held:
Date	Payee name		
03/09/2011	H-E-B		
Amount (\$)	Payee address City; State; Zip Co	ode	
\$54.78 	1000 East 41st Street Austin, TX 78751		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sch Event Expense	edule) Description (I Supplies for O	f travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sough	nt: Office held:

EXPENDITURE

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 (512)463-5800 TDD 1-800-735-2989 POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Advertising Expense Accounting/Banking Gifts/Awards/Memorial Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense Consulting Expense Event Expense Travel In District Travel Out Of District Office Overhead/Rental Expense OTHER (enter a category not listed above) The INSTRUCTION GUIDE explains how to complete this form. 1 PAGE# 3 ACCOUNT # (TEC filers) 2 FILER NAME Morrison, Laura (Mrs.) Schedule: 5/14 Report: 60/70 00000001 4 Date 5 Payee name Junior's Beer and Wine 03/09/2011 6 Amount (\$) Payee address City; State; Zip Code 705 West 29th Street \$97.89 Austin, TX 78705 (a) Category (See Categories listed at the top of this schedule) 8 (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Food/Beverage Expense Beverages for Office Opening EXPENDITURE 9 Complete ONLY if Candidate / Officeholder name Office held: Office sought: direct expenditure to benefit C/OH Date Pavee name 03/29/2011 Littlefield Consulting Amount (\$) Pavee address City; State; Zip Code P.O. Box 90591 \$300.00 Austin, TX 78709 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Consulting Expense Phone Match Data OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: to benefit C/OH Date Pavee name 02/01/2011 Morrison, Laura Amount (\$) Payee address City; State; Zip Code 610 Baylor Street Austin, TX 78703 \$500.00 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** Loan Repayment/Reimbursement Loan Repayment EXPENDITURE Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Date Pavee name Northfield Neighborhood Association 02/28/2011 City; State; Zip Code Amount (\$) Payee address \$45.00 P.O. Box 301591 Austin, TX 78703 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Ad in newsletter Advertising Expense OF

Office held:

Office sought:

OF EXPENDITURE

Complete ONLY if direct expenditure to benefit C/OH

01/12/2011 Amount (\$)

PURPOSE

OF EXPENDITURE

Complete ONLY if direct expenditure to benefit C/OH

\$7.57

Date

Candidate / Officeholder name

City; State; Zip Code

Category (See Categories listed at the top of this schedule)

Office Overhead/Rental Expense

Candidate / Officeholder name

Payee name OfficeMax

Payee address

907 West 5th Street

Austin, TX 78703

P.O.Box 12070 (512)463-5800 TDD 1-800-735-2989 Texas Ethics Commission Austin, Texas 78711-2070 POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Advertising Expense Accounting/Banking Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Gifts/Awards/Memorial Expense Loan Repayment/Reimbursement Legal Services Food/Beverage Expense Polling Expense Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Consulting Expense Event Expense Travel In District Travel Out Of District Fees Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 2 FILER NAME 1 PAGE# 3 ACCOUNT # (TEC filers) Morrison, Laura (Mrs.) 00000001 Schedule: 6/14 Report: 61/70 4 Date 5 Payee name 01/18/2011 Nuevo Leon Inc. 6 Amount (\$) Payee address City; State; Zip Code 1501 East 6th Street \$1,115.46 Austin, TX 78702 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE Event Expense** Campaign Kick-Off Party OF EXPENDITURE 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 01/10/2011 Office Depot Amount (\$) Payee address City; State; Zip Code 2101 South Lamar Boulevard \$29.21 Austin, TX 78704 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Office Overhead/Rental Expense Office Supplies - pens, paper OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Payee name Date 01/04/2011 OfficeMax Amount (\$) Payee address City; State; Zip Code 907 West 5th Street \$156.95 Austin, TX 78703 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Office Overhead/Rental Expense Printer toner

Office sought:

Description

Office sought:

Office Supplies - pens, nametags

Office held:

(If travel outside of Texas, complete Schedule T)

Office held:

SCHEDULE F

Advertising Expense

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor

Advertising Expe Accounting/Bant Consulting Expe Event Expense Fees	ing Legal Services Solicitationse Food/Beverage Expense Travel In I Polling Expense Travel Ou Printling Expense Office Over	n/Fundraising Expense Transportation District Contributions at Of District Candidate	nent/Reimbursement in Equipment & Related Expense //Donations Made By //Officeholder/Political Committee er a category not listed above)
1 PAGE#	2 FILER NAME		3 ACCOUNT # (TEC fiters)
Schedule: 7/14 F	Report: 62/70 Morrison, Laura (Mrs.)		00000001
4 Date	5 Payee name		
01/20/2011	OfficeMax		
6 Amount (\$)	7 Payee address City; State; Zip Code		
\$30.86	907 West 5th Street Austin, TX 78703		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule Office Overhead/Rental Expense	(b) Description (If travel outsid Office Supplies - paper	e of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
04/01/2011	OfficeMax		
Amount (\$)	Payee address City; State; Zip Code	····	
\$13.62	907 West 5th Street Austin, TX 78703		
	Category (See Categories listed at the top of this schedule) Description (If travel outside	of Texas, complete Schedule T)
PURPOSE	Office Overhead/Rental Expense	Office Supplies - paper	
OF EXPENDITURE			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 01/18/2011	Payee name Party City		
Amount (\$)	Payee address City; State; Zip Code		
\$19.44	5601 Brodie Lane Austin, TX 78745		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense) Description (If travel outside Balloons	of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 04/04/2011	Payee name PayPal		
Amount (\$)	Payee address City; State; Zip Code		
\$351.33	1840 Embarcadero Road Palo Alto, CA 94303		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside Cumulative processing fee	of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

SCHEDULE F

EXPENDITURE CATEGORIES Advertising Expense Accounting/Banking Consulting Expense Event Expense Food/Beverage Expense Foes Printing Expense Foes Printing Expense Food/Beverage Food/Bev						
rees	The Instruction Guide explains how t	,	a category not instea above)			
1 PAGE # Schedule: 8/14 F	2 FILER NAME Morrison, Laura (Mrs.)		3 ACCOUNT # (TEC filers) 00000001			
4 Date 04/04/2011	5 Payee name Piryx, Inc.					
6 Amount (\$)	7 Payee address City; State; Zip Code					
\$56.25	401 West 15th Street Suite 520 Austin, TX 78701					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description (If travel outside of Texas, complete Schedule) Cumulative processing fees for reporting period					
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:			
Date 02/18/2011	Payee name Sage - 3006 Guadalupe, LTD					
Amount (\$) \$3,000.00	Payee address City; State; Zip Code 1717 West 6th Street Suite 390 Austin, TX 78703					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Office Rent	of Texas, complete Schedule T)			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:			
Date	Payee name					
02/18/2011	State Farm Insurance Company					
Amount (\$) \$117.75	Payee address City; State; Zip Code 3500 Jefferson Suite 313 Austin, TX 78731					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Insurance for Office Space	f Texas, complete Schedule T)			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:			
Date	Payee name					
01/05/2011	Sundog Design					
Amount (\$) \$450.00	Payee address City; State; Zip Code 10 Kern Ramble Austin, TX 78722					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside o Logo Design	Texas, complete Schedule T)			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:			

SCHEDULE F

Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	king Legal Serv ense Food/Beve Polling Exp Printing Ex	rds/Memorial Expense vices prage Expense pense xpense The Instruction Guid	ITURE CATEGO Salaries/Wages/Cor Solicitation/Fundrais Travel In District Travel Out Of Distric Office Overhead/Re. DE explains how t	ntract Labor sing Expense of untal Expense	Transportation Contributions/ Candidate/ OTHER (enter	nent/Reimbursement n Equipment & Related Expense (Donations Made By Officeholder/Political Committee r a category not listed above)
1 PAGE# Schedule: 9/14 F	[-	PILER NAME Morrison, Laura (Mrs.))			3 ACCOUNT# (TEC file 00000001
4 Date 03/21/2011	5 Payee name Time Warner 0	Cable	<u> </u>			
6 Amount (\$) \$322.64	7 Payee address	City; State; Z	ip Code	News		
8 PURPOSE OF EXPENDITURE	1	ategories listed at the top of thi ad/Rentał Expense	is schedule)	(b) Description Internet Ser		e of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Office	eholder name	Office so	ught:	Office held:	
Date	Payee name	Democratic Party				
02/28/2011 Amount (\$)	Payee address	Democratic Party City; State; Zi	in Code			
\$250.00		Street				
PURPOSE OF EXPENDITURE	Contributions/D	ategories listed at the top of this Donations Made By ceholder/Political Commi	,	Description Event Spons		of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Office	eholder name		Office sou	ıght:	Office held:
Date 03/09/2011	Payee name Twin Liquors			-		
Amount (\$) \$27.58	Payee address 2932 Guadalup Austin, TX 787		p Code			
PURPOSE OF EXPENDITURE	Category (See Ca Food/Beverage	ategories listed at the top of this Expense	s schedule)	Description Beverages fo	(If travel outside or Office Oper	of Texas, complete Schedule ^T) [ning
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Office	sholder name		Office sou	ght:	Office held:
Date 01/04/2011	Payee name United States P	ostal Service				
Amount (\$)	Payee address		p Code			
\$308.00	7310 Manchace Austin, TX 787					
PURPOSE OF EXPENDITURE		ategories listed at the top of this draising Expense	schedule)	Description Postage	(If travel outside of	of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Office	holder name		Office sou	ght:	Office held:

SCHEDULE F

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor

Schedule: 10/14 Report: 65/70 Morrison, Laura (Mrs.) 4 Date 5 Payee name United States Postal Service 6 Amount (\$) 7 Payee address City: State; Zip Code 7310 Manchaca Road Austin, TX 78745	ACCOUNT # (TEC filers) 00000001 xas, complete Schedule T) Office held:
4 Date 01/10/2011 5 Payee name United States Postal Service 6 Amount (\$) 7 Payee address City; State; Zip Code 7310 Manchaca Road Austin, TX 78745 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense Postage 9 Complete ONLY if direct expenditure Candidate / Officeholder name Office sought:	xas, complete Schedule T)
O1/10/2011 United States Postal Service 6 Amount (\$) 7 Payee address City; State; Zip Code \$39.60 7310 Manchaca Road	
6 Amount (\$) 7 Payee address City; State; Zip Code \$39.60 7310 Manchaca Road Austin, TX 78745 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense 9 Complete ONLY if direct expenditure Candidate / Officeholder name Office sought:	
\$39.60 7310 Manchaca Road Austin, TX 78745 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense 9 Complete ONLY if direct expenditure Candidate / Officeholder name Office sought:	
Austin, TX 78745 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense 9 Complete ONLY if direct expenditure Candidate / Officeholder name Office sought:	
PURPOSE OF EXPENDITURE Solicitation/Fundraising Expense Postage Postage Office sought:	
direct expenditure	Office held:
Date Payee name	
01/11/2011 United States Postal Service	
Amount (\$) Payee address City; State; Zip Code	
\$39.60 7310 Manchaca Road Austin, TX 78745	
	xas, complete Schedule T)
PURPOSE Solicitation/Fundraising Expense Postage	
EXPENDITURE	
Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought:	Office held:
Date Payee name 02/24/2011 United States Postal Service	
Amount (\$) Payee address City; State; Zip Code	
\$39.60 7310 Manchaca Road Austin, TX 78745	
PURPOSE OF Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense Description (If travel outside of Tex Postage	(as, complete Schedule T)
EXPENDITURE	
Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought:	Office held:
Date Payee name	
03/28/2011 United States Postal Service	
Amount (\$) Payee address City; State; Zip Code	
\$44.00 7310 Manchaca Road Austin, TX 78745	
PURPOSE OF Category (See Categories listed at the top of this schedule) Description (If travel outside of Texal Postage Postage	as, complete Schedule T)
EXPENDITURE	
Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought:	Office held:

SCHEDULE F

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

P.O.Box 12070

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

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Conditions/Donations Made By

Event Expense Fees	Polling Exp Printing Ex		d/Rental Expense OTHER (e	ate/Officeholder/Political Committee enter a category not listed above)
1 PAGE#	2	FILER NAME		3 ACCOUNT # (TEC filers)
Schedule: 11/14	Report: 66/70	Morrison, Laura (Mrs.)		00000001
4 Date	5 Payee name			
01/11/2011	VerticalRespor			
6 Amount (\$)	7 Payee address	City; State; Zip Code		
\$28.00	501 2nd Street Suite 700 San Francisco,			
8 200000	1	ategories listed at the top of this schedule)		side of Texas, complete Schedule T) 🔲
PURPOSE OF	Office Overhea	ad/Rental Expense	E-mail service	
EXPENDITURE				
9 Complete ONLY if	Candidate / Offic	eaholder name	Office sought:	Office held:
direct expenditure to benefit C/OH	Candidate / Onic	enotice manie	Office sought.	Office fleig.
Date	Payee name			
01/20/2011	VerticalRespon			
Amount (\$)	Payee address	City; State; Zip Code		
\$27.90	501 2nd Street Suite 700 San Francisco,			
	Category (See C	ategories listed at the top of this schedule)	Description (If travel outs	side of Texas, complete Schedule T)
PURPOSE		d/Rental Expense	E-mail Service	, , ,
OF EXPENDITURE		·		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Office	eholder name	Office sought:	Office held:
Date	Payee name			
02/22/2011	VerticalRespon	se, Inc.		
Amount (\$)	Payee address	City; State; Zip Code		
\$46.00	501 2nd Street Suite 700 San Francisco,			
	Category (See Ca	ategories listed at the top of this schedule)	Description (If travel outs	side of Texas, complete Schedule T)
PURPOSE OF	Office Overhead	d/Rental Expense	E-mail Service	_
EXPENDITURE				
Complete ONLY if	Candidate / Office	eholder name	Office sought:	Office held:
direct expenditure to benefit C/OH				
Date	Payee name			
03/21/2011	VerticalRespons	se, Inc.		
Amount (\$)	Payee address	City; State; Zip Code		
\$46.00	501 2nd Street			
Ψ-0.00	Suite 700 San Francisco,	CA 94107		
	Category (See Ca	itegories listed at the top of this schedule)	Description (If travel outsi	ide of Texas, complete Schedule T)
PURPOSE		d/Rental Expense	E-mail Service	,,
OF EXPENDITURE		•		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Office	holder name	Office sought:	Office held:

SCHEDULE F

Advertising Exp Accounting/Ban Consulting Expe Event Expense Fees	king Legal Services Solicitationse Food/Beverage Expense Travel In Polling Expense Travel O	Wages/Contract Labor on/Fundraising Expense District ut Of District verhead/Rental Expense	Loan Repayment/Re Transportation Equip Contributions/Donali Candidate/Officeh OTHER (enter a cate form.	ment & Related I ons Made By older/Political Co	mmittee
1 PAGE# Schedule: 12/14	Report: 67/70 2 FILER NAME Morrison, Laura (Mrs.)		1-	ACCOUNT # 00000001	(TEC filers)
4 Date	5 Payee name				
03/09/2011	Wheatsville Food Co-Op	· · · · · · · · · · · · · · · · · · ·			
6 Amount (\$) \$7,35	7 Payee address City; State; Zip Code 3101 Guadalupe Street Austin, TX 78705				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedul Event Expense		(If travel outside of Tex r Office Opening	as, complete Sch	nedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office so	ught:	Office held:	
Date 03/09/2011	Payee name Wheatsville Food Co-Op				
Amount (\$) \$21.18	Payee address City; State; Zip Code 3101 Guadalupe Street Austin, TX 78705				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule Event Expense	'	(If travel outside of Tex Office Opening	as, complete Sch	nedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office so	ught:	Office held:	
Date 03/09/2011	Payee name Wheatsville Food Co-Op				
Amount (\$) \$42.91	Payee address City; State; Zip Code 3101 Guadalupe Street Austin, TX 78705				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule Event Expense		(If travel outside of Texa upplies for Office Op		edule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sou	ught:	Office held:	
Date	Payee name		<u> </u>		
01/01/2011	Wick, Jim				
Amount (\$) \$2,000.00	Payee address City; State; Zip Code 2611 Ektom Drive Unit D Austin, TX 78745			100	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule Salaries/Wages/Contract Labor	Description Salary	(If travel outside of Texa	s, complete Sch	edule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sou	ght:	Office held:	

Complete ONLY if

direct expenditure to benefit C/OH

Candidate / Officeholder name

POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Advertising Expense Accounting/Banking Gifts/Awards/Memorial Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Legal Services Food/Beverage Expense Travel In District Travel Out Of District Consulting Expense Polling Expense Printing Expense Event Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 PAGE# 3 ACCOUNT # (TEC filers) 2 FILER NAME Morrison, Laura (Mrs.) 00000001 Schedule: 13/14 Report: 68/70 5 Payee name 4 Date Wick, Jim 01/20/2011 6 Amount (\$) 7 Payee address City: State: Zip Code 2611 Ektom Drive \$2,000.00 Unit D Austin, TX 78745 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) R **PURPOSE** Salaries/Wages/Contract Labor Salary **EXPENDITURE** 9 Complete ONLY if Candidate / Officeholder name Office held: Office sought: direct expenditure to benefit C/OH Date Pavee name 02/01/2011 Wick, Jim Pavee address Amount (\$) City: State: Zip Code 2611 Ektom Drive \$2,000.00 Unit D Austin, TX 78745 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Salaries/Wages/Contract Labor Salary OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Pavee name Wick, Jim 02/18/2011 Amount (\$) Payee address City; State; Zip Code 2611 Ektom Drive \$2,000.00 Unit D Austin, TX 78745 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE Salaries/Wages/Contract Labor Salary OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Pavee name 03/01/2011 Wick, Jim Amount (\$) Payee address City; State; Zip Code 2611 Ektom Drive \$2,000.00 Unit D Austin, TX 78745 Description Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) **PURPOSE** Salaries/Wages/Contract Labor Salary OF **EXPENDITURE**

Office held:

Office sought:

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense

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

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

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By

Event Expense Fees	Polling Expense Travel Out Of Di Printing Expense Office Overhead The Instruction Guide explains ho	l/Rental Expense OTHER (e	nter a category not listed above)
1 PAGE#	2 FILER NAME		3 ACCOUNT # (TEC filers)
Schedule: 14/14			_0000001
4 Date	5 Payee name		
03/21/2011	Wick, Jim		
6 Amount (\$)	7 Payee address City; State; Zip Code		
\$2,000.00	I Unit D		
	Austin, TX 78745		
8	(a) Category (See Categories listed at the top of this schedule)	1 * *	side of Texas, complete Schedule T)
PURPOSE OF	Salaries/Wages/Contract Labor	Salary	
EXPENDITURE			
9 Complete ONLY 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

Advertising Expense Accounting/Banking Consulting Expense

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

P.O.Box 12070

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

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By

Event Expense Fees	Polling I Printing	Expense Expense		ead/Rental Expense	OTHER (enter a	fficeholder/Political C a category not listed :	ommittee above)
<u></u>			Guide explains	how to complete th	is form.		
1 PAGE# Schedule: 1/1 Re	eport: 70/70	2 FILER NAME Morrison, Laura (I				3 ACCOUNT# 00000001	(TEC filers)
4 Date	5 Payee name	<u> </u>					
01/01/2011	AT&T						
6 Amount (\$)	7 Payee addres	s City; State	; Zip Code				
\$92.72	P.O. Box 656						
Reimbursement from political contributions intended	Dailas, TX 7	75265					
8 PURPOSE		e Categories listed at the top	of this schedule)	(b) Description	,	of Texas, complete S	chedule T)
OF	Office Overn	ead/Rental Expense		Phone s	ervice		
EXPENDITURE			•				
Date	Payee name						
02/06/2011	AT&T						
Amount (\$)	Payee address		Zip Code				
\$34.71	P.O. Box 650 Dallas, TX 7						
Reimbursement from political	Dallas, 17.7	5205					
contributions intended	Category (See	Categories listed at the top	of this schedule)	Description	n (If travel outside o	f Texas, complete So	hedule T\
PURPOSE		ead/Rental Expense		Phone S			
OF EXPENDITURE	·	•					
'					•		
					<u> </u>		
Date	Payee name		<u>.</u>	··			
03/06/2011 Amount (\$)	AT&T	City; State	- Zin Codo			. <u>.</u>	
	Payee address P.O. Box 650	•	Zip Code				
\$34.71 Reimbursement	Dallas, TX 7						}
Reimbursement from political contributions intended							
PURPOSE		Categories listed at the top	of this schedule)	Descriptio		f Texas, complete Sc	hedule T)
OF	Office Overhe	ead/Rental Expense		Phone Se	ervice		
EXPENDITURE							
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<u> </u>		<u></u>		<u> </u>			
							}
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	-						
							1

individual's residence.)

Name of Candidate/Officeholder: LAURA MORRISON

PERSONS SOLICITING CONTRIBUTIONS ON YOUR BEHALF

	— · · · ·			
Enter the name and addr	ess of any person w	ho has solicited	d and obtained	contributions
on your behalf during	the reporting period	d of \$200 per	person from	five or more
individuals. (This require	ement does not apply	y to an individu	ial who raises	funds in total
amount of \$5,000 or le	ess for a candidate	through a fur	ndraising even	t held at the

Name of person soliciting contributions	Address		
**EDWARD KARGBO	8834 HONEYSUCKLE TRL, AUSTIN, TX 78759		
***FRANCISCO FUENTES, JR.	5311 HARMON LN, AUSTIN, TX 78751		

Reminder: This form is to identify bundlers, i.e. individuals who solicit and obtain contributions on your behalf. Remember there is a separate form to identify the *actual* donors (C/OH).

NOTE: DONATIONS COLLECTED BY BUNDLERS LISTED ABOVE ARE NOTED IN THE "OCCUPATION" FIELD FOR EACH DONATION WITH THE CORRESPONDING ASTERISKS.