

FORM C/OH
COVER SHEET PG 1

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME Morrison, Laura (Mrs.)

15 ACCOUNT # (Ethics Commission filers)
0000000116 NOTICE
FROM
POLITICAL
COMMITTEE(S)

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

COMMITTEE TYPE

☒ GENERAL☐ SPECIFIC

COMMITTEE NAME

Better Austin Today PAC

COMMITTEE ADDRESS

P.O. Box 91041
Austin, TX 78709-1041

COMMITTEE CAMPAIGN TREASURER NAME

Ogunro, Sunny

COMMITTEE CAMPAIGN TREASURER ADDRESS

P.O. Box 91041
Austin, TX 78709☐ additional pages17 CONTRIBUTION
TOTALS1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN
PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$

0.00

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

\$

12,940.00

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$

60.00

4. TOTAL POLITICAL EXPENDITURES

\$

61,012.74

CONTRIBUTION
BALANCE5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$

6,095.28

OUTSTANDING
LOAN TOTALS6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$

0.00

18 AFFIDAVIT



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

Laura Morrison
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Laura Morrison, this the 7 day
of July, 20 11, to certify which, witness my hand and seal of office.

Reyna Ruiz
Signature of officer administering oath

Reyna Ruiz
Print name of officer administering oath

Admin Specialist
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 1/14 Report: 3/27

2 FILER NAME Morrison, Laura (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Abbott, Robin

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

05/10/2011

6 Contributor address; City; State; Zip Code

5601 Blueridge Court
Austin, TX 78731

\$100.00

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)

Aguirre, Lupe

Amount of contribution (\$)

In-kind contribution description (if applicable)

05/12/2011

Contributor address; City; State; Zip Code

2210 White Dove Pass
Austin, TX 78734

\$350.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Store Manager

Employer (See Instructions)
Bealls

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)

Albright, Thomas

Amount of contribution (\$)

In-kind contribution description (if applicable)

05/10/2011

Contributor address; City; State; Zip Code

1305 Alla Vista Avenue
Austin, TX 78704

\$25.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)

Alexander, Mike

Amount of contribution (\$)

In-kind contribution description (if applicable)

05/05/2011

Contributor address; City; State; Zip Code

2827 Salado Street
Austin, TX 78705

\$75.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)

Arriola, Richard

Amount of contribution (\$)

In-kind contribution description (if applicable)

05/07/2011

Contributor address; City; State; Zip Code

7700 Whispering Winds Drive
Austin, TX 78745

\$10.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 2/14 Report: 4/27

2 FILER NAME Morrison, Laura (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Bailey, Brooke

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

05/10/2011

6 Contributor address; City; State; Zip Code

1801 West 10th Street

Austin, TX 78703

\$25.00

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)

Bailey, Heather

Amount of contribution (\$)

In-kind contribution description (if applicable)

05/10/2011

Contributor address; City; State; Zip Code

1500 Raleigh Avenue

Austin, TX 78703

\$100.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)

Barker, Bobbie

Amount of contribution (\$)

In-kind contribution description (if applicable)

05/06/2011

Contributor address; City; State; Zip Code

802 Terrace Mountain Drive

Austin, TX 78746

\$50.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)

Burton, Charles

Amount of contribution (\$)

In-kind contribution description (if applicable)

05/08/2011

Contributor address; City; State; Zip Code

1118 Mission Ridge

Austin, TX 78704

\$40.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)

Carroll, Marianne

Amount of contribution (\$)

In-kind contribution description (if applicable)

05/14/2011

Contributor address; City; State; Zip Code

210 Lee Barton Drive

Unit 613

Austin, TX 78704

\$50.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

*

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 3/14 Report: 5/27

2 FILER NAME Morrison, Laura (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Cartledge, Ron

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

05/10/2011

6 Contributor address; City; State; Zip Code

1802 Woodland Avenue
Austin, TX 78741

\$30.00

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)

Cates, Nancy

Amount of contribution (\$)

In-kind contribution description (if applicable)

05/05/2011

Contributor address; City; State; Zip Code

P.O. Box 1163
Dripping Springs, TX 78620

\$100.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)

Dougherty, Molly

Amount of contribution (\$)

In-kind contribution description (if applicable)

05/10/2011

Contributor address; City; State; Zip Code

1100 Claire Drive
Austin, TX 78703

\$15.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)

Elfant, Bruce

Amount of contribution (\$)

In-kind contribution description (if applicable)

05/07/2011

Contributor address; City; State; Zip Code

4522 Avenue F
Austin, TX 78751

\$100.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)

Friese, Karen

Amount of contribution (\$)

In-kind contribution description (if applicable)

05/09/2011

Contributor address; City; State; Zip Code

6603 Cat Creek Trail
Austin, TX 78731

\$350.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Engineer

Employer (See Instructions)
K Friese & Associates

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 4/14 Report: 6/27

2 FILER NAME Morrison, Laura (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

05/10/2011

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Fuselier, James

6 Contributor address; City; State; Zip Code
5804 Garden Oaks
Austin, TX 78745

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)
Dentist

10 Employer (See Instructions)
Self

Date

05/07/2011

Full name of contributor ☐ out-of-state PAC (ID# _____)
Genet, Kathy

Contributor address; City; State; Zip Code
3000 Kerbey Lane
Austin, TX 78703

Amount of
contribution (\$)

\$20.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/13/2011

Full name of contributor ☐ out-of-state PAC (ID# _____)
Gentle, James

Contributor address; City; State; Zip Code
2006 Arthur Lane
Austin, TX 78704

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/13/2011

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ginsberg, Michael

Contributor address; City; State; Zip Code
2901 Cityplace West Boulevard
Apt. 617
Dallas, TX 75204

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Program Director

Employer (See Instructions)
Palmer Drug Abuse Program of Austin

Date

05/11/2011

Full name of contributor ☐ out-of-state PAC (ID# _____)
Graham, Lawrence

Contributor address; City; State; Zip Code
5909 Bull Creek Road
Austin, TX 78757

Amount of
contribution (\$)

\$150.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 5/14 Report: 7/27

2 FILER NAME Morrison, Laura (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

05/10/2011

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Greenberg, Leigh Anne

6 Contributor address; City; State; Zip Code
1522 South Congress Avenue
Austin, TX 78704

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

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

10 Employer (See Instructions)
None

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Greenberg, Sean

05/07/2011

Contributor address; City; State; Zip Code
330 Eanes School Road
Austin, TX 78746

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
*Buyer

Employer (See Instructions)
Allen's Boots

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Greenberg, Stephen

05/10/2011

Contributor address; City; State; Zip Code
1522 South Congress Avenue
Austin, TX 78704

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
*Owner

Employer (See Instructions)
Allen's Boots

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Hammond, Granville

05/13/2011

Contributor address; City; State; Zip Code
403 Chaparral Road
Austin, TX 78745

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Auditor

Employer (See Instructions)
City of Austin

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Harris, Karen

05/10/2011

Contributor address; City; State; Zip Code
1409 Alameda Drive
Austin, TX 78704

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 6/14 Report: 8/27

2 FILER NAME Morrison, Laura (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

05/10/2011

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Hartman, David

6 Contributor address; City; State; Zip Code
300 Bowie Street #1008
Austin, TX 78703

7 Amount of contribution (\$)

\$25.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

05/08/2011

Full name of contributor ☐ out-of-state PAC (ID# _____)
Harutunian, Anne

Contributor address; City; State; Zip Code
P.O. Box W
Austin, TX 78713

Amount of contribution (\$)

\$300.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Marketing Director

Employer (See Instructions)
Harutunian Engineering

Date

05/08/2011

Full name of contributor ☐ out-of-state PAC (ID# _____)
Harutunian, Takoohy

Contributor address; City; State; Zip Code
P.O. Box W
Austin, TX 78713

Amount of contribution (\$)

\$300.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
CEO

Employer (See Instructions)
Harutunian Engineering

Date

05/11/2011

Full name of contributor ☐ out-of-state PAC (ID# _____)
Hauser, Adam

Contributor address; City; State; Zip Code
7701 Bramblewood Circle
Austin, TX 78731

Amount of contribution (\$)

\$350.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
*Attorney

Employer (See Instructions)
Brown McCarroll

Date

05/11/2011

Full name of contributor ☐ out-of-state PAC (ID# _____)
Head, Bill

Contributor address; City; State; Zip Code
1104 Enfield Drive
Austin, TX 78703

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The **INSTRUCTION GUIDE** explains how to complete this form.

1 PAGE #

Schedule: 7/14 Report: 9/27

2 FILER NAME Morrison, Laura (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

05/07/2011

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Holderness, Earl

6 Contributor address; City; State; Zip Code
2943 Thousand Oaks Drive
Austin, TX 78746

7 Amount of contribution (\$)

\$100.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Hopkins, William

05/06/2011

Contributor address; City; State; Zip Code
3324 Silkgrass Bend
Austin, TX 78748

Amount of contribution (\$)

\$350.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
*Attorney

Employer (See Instructions)
Brown McCarroll

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Hughes, Chris

05/12/2011

Contributor address; City; State; Zip Code
6205 Indian Canyon Drive
Austin, TX 78746

Amount of contribution (\$)

\$350.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
*Attorney

Employer (See Instructions)
Brown McCarroll

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Jefferson, Ellen

05/10/2011

Contributor address; City; State; Zip Code
1400 Eva Street
Austin, TX 78704

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Johnson, Rodman

05/06/2011

Contributor address; City; State; Zip Code
4204 Venado Drive
Austin, TX 78731

Amount of contribution (\$)

\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
*Attorney

Employer (See Instructions)
Brown McCarroll

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 8/14 Report: 10/27

2 FILER NAME Morrison, Laura (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

05/13/2011

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Jung, Richard

6 Contributor address; City; State; Zip Code
2530 Harris Boulevard
Austin, TX 78703

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)
Principal

10 Employer (See Instructions)
Jung & Associates, PLLC

Date

05/10/2011

Full name of contributor ☐ out-of-state PAC (ID# _____)
Kauffman, Brad

Contributor address; City; State; Zip Code
7006 Priscilla Drive
Austin, TX 78752

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/13/2011

Full name of contributor ☐ out-of-state PAC (ID# _____)
Kim, Paul

Contributor address; City; State; Zip Code
10524 Roy Butler Drive
Austin, TX 78717

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
President

Employer (See Instructions)
ATX Environmental Solutions, LLC

Date

05/06/2011

Full name of contributor ☐ out-of-state PAC (ID# _____)
Larson, Dohn

Contributor address; City; State; Zip Code
1008 East 44th Street
Austin, TX 78751

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
*Attorney

Employer (See Instructions)
Texas Classroom Teacher's Association

Date

05/09/2011

Full name of contributor ☐ out-of-state PAC (ID# _____)
Lehman, Chris

Contributor address; City; State; Zip Code
1914 A Larchmont Drive
Austin, TX 78704

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 9/14 Report: 11/27

2 FILER NAME Morrison, Laura (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Matula, Judy

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

05/10/2011

6 Contributor address; City; State; Zip Code

5917 Lookout Mountain Drive
Austin, TX 78731

\$100.00

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)

McClendon, Jim

Amount of contribution (\$)

In-kind contribution description (if applicable)

05/11/2011

Contributor address; City; State; Zip Code

3810 Meandering Creek Cove
Austin, TX 78746

\$25.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)

McElhatten, Karen

Amount of contribution (\$)

In-kind contribution description (if applicable)

05/10/2011

Contributor address; City; State; Zip Code

7108 Gentle Oak Drive
Austin, TX 78749

\$100.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)

McWilliams, Andrea

Amount of contribution (\$)

In-kind contribution description (if applicable)

05/12/2011

Contributor address; City; State; Zip Code

1710 Windsor Road
Austin, TX 78703

\$350.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Founder

Employer (See Instructions)
McWilliams Governmental Affairs

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)

McWilliams, Dean

Amount of contribution (\$)

In-kind contribution description (if applicable)

05/12/2011

Contributor address; City; State; Zip Code

1710 Windsor Road
Austin, TX 78703

\$350.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Founder

Employer (See Instructions)
McWilliams Governmental Affairs

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 10/14 Report: 12/27

2 FILER NAME Morrison, Laura (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

05/06/2011

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Meade, Gloria

6 Contributor address; City; State; Zip Code
19822 Teller Boulevard
Spring, TX 77388

7 Amount of contribution (\$)

\$100.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Meade, Kyyla

05/06/2011

Contributor address; City; State; Zip Code
5363 Austral Loop
Austin, TX 78739

Amount of contribution (\$)

\$350.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
*Student

Employer (See Instructions)
None

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Meade, Manuel

05/06/2011

Contributor address; City; State; Zip Code
19822 Teller Boulevard
Spring, TX 77388

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Meade, Mark

05/06/2011

Contributor address; City; State; Zip Code
2016 Fall Creek Drive
Leander, TX 78641

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Menyhert, Joy

05/10/2011

Contributor address; City; State; Zip Code
1507 Mohle Drive
Austin, TX 78703

Amount of contribution (\$)

\$25.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The **INSTRUCTION GUIDE** explains how to complete this form.

1 PAGE #

Schedule: 11/14 Report: 13/27

2 FILER NAME Morrison, Laura (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Meyer, Gretchen

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

05/09/2011

6 Contributor address; City; State; Zip Code

1406 Kinney Avenue
Austin, TX 78704

\$25.00

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)

Michel, Lorri

Amount of contribution (\$)

In-kind contribution description (if applicable)

05/13/2011

Contributor address; City; State; Zip Code

917 West Lynn Street
Austin, TX 78703

\$350.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Michel Law Firm

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)

Oliver, Guy

Amount of contribution (\$)

In-kind contribution description (if applicable)

05/10/2011

Contributor address; City; State; Zip Code

3119 Honey Tree Lane
Austin, TX 78746

\$350.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
*General Manager

Employer (See Instructions)
MTG Management

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)

Oliver, Jason

Amount of contribution (\$)

In-kind contribution description (if applicable)

05/10/2011

Contributor address; City; State; Zip Code

3267 Bee Cave Road #107 #92
Austin, TX 78746

\$350.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
*Land Manager

Employer (See Instructions)
MTG Management

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)

Oliver, Kerianne

Amount of contribution (\$)

In-kind contribution description (if applicable)

05/10/2011

Contributor address; City; State; Zip Code

3119 Honey Tree Lane
Austin, TX 78746

\$350.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
*Homemaker

Employer (See Instructions)
None

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 12/14 Report: 14/27

2 FILER NAME Morrison, Laura (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

05/10/2011

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Oliver, Stacy

6 Contributor address; City; State; Zip Code
3267 Bee Cave Road #107 #92
Austin, TX 78746

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

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

10 Employer (See Instructions)
MTG Management

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Oliver, Vicki

05/10/2011

Contributor address; City; State; Zip Code
3267 Bee Cave Road #107 #92
Austin, TX 78746

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
*Owner

Employer (See Instructions)
MTG Management

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Phillips, Travis

05/06/2011

Contributor address; City; State; Zip Code
2309 Farnswood Circle
Austin, TX 78704

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
*

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Pyle, Melanie

05/06/2011

Contributor address; City; State; Zip Code
2016 Fall Creek Drive
Leander, TX 78641

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
*

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Rao, Mohan

05/11/2011

Contributor address; City; State; Zip Code
6202 Peggy Street
Austin, TX 78723

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 13/14 Report: 15/27

2 FILER NAME Morrison, Laura (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

05/10/2011

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Russell, Kim

6 Contributor address; City; State; Zip Code
7813 Via Verde Drive
Austin, TX 78739

7 Amount of
contribution (\$)

\$100.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

05/14/2011

Full name of contributor ☐ out-of-state PAC (ID# _____)
Sharples, Brian

Contributor address; City; State; Zip Code
23 Hull Circle Drive
Austin, TX 78746

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/14/2011

Full name of contributor ☐ out-of-state PAC (ID# _____)
Sharples, Tracey

Contributor address; City; State; Zip Code
23 Hull Circle Drive
Austin, TX 78746

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/14/2011

Full name of contributor ☐ out-of-state PAC (ID# _____)
Shepherd, Carl

Contributor address; City; State; Zip Code
301 Briarwood Trail
Austin, TX 78746

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
*Executive

Employer (See Instructions)
HomeAway

Date

05/10/2011

Full name of contributor ☐ out-of-state PAC (ID# _____)
Thompson, James

Contributor address; City; State; Zip Code
3310-A Doolin Drive
Austin, TX 78704

Amount of
contribution (\$)

\$150.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 14/14 Report: 16/27

2 FILER NAME Morrison, Laura (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Wallace, H. Dalton

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

05/13/2011

6 Contributor address; City; State; Zip Code
9505 Johnny Morris Road
Austin, TX 78724

\$350.00

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)
Owner

10 Employer (See Instructions)
SafeSite Inc.

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Walton, Marsha

Amount of contribution (\$)

In-kind contribution description (if applicable)

05/07/2011

Contributor address; City; State; Zip Code
1701 Bouldin Avenue
Austin, TX 78704

\$25.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Watkins, Thomas

Amount of contribution (\$)

In-kind contribution description (if applicable)

05/06/2011

Contributor address; City; State; Zip Code
1918 East Side Drive
Austin, TX 78704

\$350.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
*Attorney

Employer (See Instructions)
Brown McCarroll

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Waugh, Gene

Amount of contribution (\$)

In-kind contribution description (if applicable)

05/12/2011

Contributor address; City; State; Zip Code
608 Harthan Street
Austin, TX 78703

\$25.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Wilson, Paul

Amount of contribution (\$)

In-kind contribution description (if applicable)

05/11/2011

Contributor address; City; State; Zip Code
7 Sentinel Hill
Austin, TX 78737

\$200.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Regional Vice President

Employer (See Instructions)
Texas Gas Service

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/10 Report: 17/27		2 FILER NAME Morrison, Laura (Mrs.)		3 ACCOUNT # (TEC filers) 00000001	
4 Date 05/08/2011	5 Payee name Armand, Reginald				
6 Amount (\$) \$291.50	7 Payee address City: State: Zip Code 2200 South Pleasant Valley Austin, TX 78741				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/14/2011	Payee name Armand, Reginald				
Amount (\$) \$319.00	Payee address City: State: Zip Code 2200 South Pleasant Valley Austin, TX 78741				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/12/2011	Payee name AT&T				
Amount (\$) \$82.70	Payee address City: State: Zip Code 1011 West 5th Street 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 Texas, complete Schedule T) <input type="checkbox"/> Phone Service		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/09/2011	Payee name Austin Chronicle				
Amount (\$) \$1,870.00	Payee address City: State: Zip Code P.O. Box 49066 Austin, TX 78765				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Advertising		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 2/10 Report: 18/27		2 FILER NAME Morrison, Laura (Mrs.)		3 ACCOUNT # (TEC filers) 00000001	
4 Date 05/13/2011		5 Payee name Badgley, Shawn			
6 Amount (\$) \$1,750.00		7 Payee address City: State: Zip Code 1005 Edgecliff Terrace Austin, TX 78704			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 05/30/2011		Payee name Badgley, Shawn			
Amount (\$) \$3,500.00		Payee address City: State: Zip Code 1005 Edgecliff Terrace Austin, TX 78704			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 05/08/2011		Payee name Black, Kevin			
Amount (\$) \$350.75		Payee address City: State: Zip Code 4606 Bennett Avenue Austin, TX 78751			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 05/14/2011		Payee name Black, Kevin			
Amount (\$) \$247.25		Payee address City: State: Zip Code 4606 Bennett Avenue Austin, TX 78751			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 3/10 Report: 19/27		2 FILER NAME Morrison, Laura (Mrs.)		3 ACCOUNT # (TEC filers) 00000001
4 Date 05/30/2011	5 Payee name Black, Kevin			
6 Amount (\$) \$500.00	7 Payee address City; State; Zip Code 4606 Bennett Avenue Austin, TX 78751			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 05/30/2011	Payee name Butts, David			
Amount (\$) \$5,000.00	Payee address City; State; Zip Code 1914 Patton Lane Austin, TX 78723			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consulting Fees	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 05/09/2011	Payee name Checkmark Typesetting			
Amount (\$) \$97.43	Payee address City; State; Zip Code 3217 N IH-35 Austin, TX 78722			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Design work	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 05/14/2011	Payee name CVS Pharmacy			
Amount (\$) \$20.26	Payee address City; State; Zip Code 2927 Guadalupe Street Austin, TX 78705			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Food supplies for Election Day	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 4/10 Report: 20/27		2 FILER NAME Morrison, Laura (Mrs.)		3 ACCOUNT # (TEC filers) 00000001
4 Date 05/12/2011	5 Payee name Good Luck Food Mart			
6 Amount (\$) \$15.05	7 Payee address City: State: Zip Code 3713 Guadalupe Street Austin, TX 78705			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Beverages for staff	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 05/30/2011	Payee name Levinski, Robert			
Amount (\$) \$1,000.00	Payee address City: State: Zip Code 5800 Duval Street Austin, TX 78752			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consulting Fees	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 05/14/2011	Payee name Lopez, Anthony			
Amount (\$) \$319.00	Payee address City: State: Zip Code 3605 Savage Springs Drive Austin, TX 78754			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 05/07/2011	Payee name Maria's Taco Xpress			
Amount (\$) \$28.14	Payee address City: State: Zip Code 2529 South Lamar Boulevard Austin, TX 78704			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event Costs	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 5/10 Report: 21/27		2 FILER NAME Morrison, Laura (Mrs.)		3 ACCOUNT # (TEC filers) 00000001	
4 Date 05/30/2011		5 Payee name Morrison, Laura			
6 Amount (\$) \$32,878.40		7 Payee address City; State; Zip Code 610 Baylor Street Austin, TX 78703			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Loan Repayment	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 05/09/2011		Payee name OfficeMax			
Amount (\$) \$32.46		Payee address City; State; Zip Code 907 West 5th Street 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 Texas, complete Schedule T) <input type="checkbox"/> Office Supplies	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 05/10/2011		Payee name OfficeMax			
Amount (\$) \$14.91		Payee address City; State; Zip Code 907 West 5th Street 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 Texas, complete Schedule T) <input type="checkbox"/> Office Supplies	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 05/07/2011		Payee name Oliver, Bill			
Amount (\$) \$600.00		Payee address City; State; Zip Code 2728 South Congress Avenue #12 Austin, TX 78704			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Music Performance	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 6/10 Report: 22/27		2 FILER NAME Morrison, Laura (Mrs.)		3 ACCOUNT # (TEC filers) 00000001
4 Date 06/30/2011	5 Payee name PayPal			
6 Amount (\$) \$62.07	7 Payee address City; State; Zip Code 1840 Embarcadero Road Palo Alto, CA 94303			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Cumulative transaction fees for period	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 05/14/2011	Payee name Pyramid Properties			
Amount (\$) \$238.17	Payee address City; State; Zip Code 1717 West 6th Street Suite 380 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 Texas, complete Schedule T) <input type="checkbox"/> Utility charges for campaign office	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 06/30/2011	Payee name Pyramid Properties			
Amount (\$) \$220.62	Payee address City; State; Zip Code 1717 West 6th Street Suite 380 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 Texas, complete Schedule T) <input type="checkbox"/> Utilities for Office	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 05/30/2011	Payee name Rindy & Associates, Inc.			
Amount (\$) \$1,716.53	Payee address City; State; Zip Code 2401 East 6th Street Suite 1003 Austin, TX 78702			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consulting Fees	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 7/10 Report: 23/27		2 FILER NAME Morrison, Laura (Mrs.)		3 ACCOUNT # (TEC filers) 00000001
4 Date 05/08/2011	5 Payee name Romero, Erick			
6 Amount (\$) \$115.50	7 Payee address City: State: Zip Code 5705 Abby Ann Lane Austin, TX 78747			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 05/14/2011	Payee name Romero, Erick			
Amount (\$) \$85.25	Payee address City: State: Zip Code 5705 Abby Ann Lane Austin, TX 78747			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 05/30/2011	Payee name Rush, Barbara			
Amount (\$) \$1,000.00	Payee address City: State: Zip Code 1801 Palmwood Cove Austin, TX 78757			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consulting Fees	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 05/14/2011	Payee name Scholz Garten			
Amount (\$) \$9.01	Payee address City: State: Zip Code 1607 San Jacinto Boulevard Austin, TX 78701			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Victory Party food and beverages	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 8/10 Report: 24/27		2 FILER NAME Morrison, Laura (Mrs.)		3 ACCOUNT # (TEC filers) 00000001	
4 Date 05/14/2011	5 Payee name Scholz Garten				
6 Amount (\$) \$620.69	7 Payee address City: State: Zip Code 1607 San Jacinto Boulevard Austin, TX 78701				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Victory Party food and beverages		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/30/2011	Payee name Smith, Jeff				
Amount (\$) \$1,250.00	Payee address City: State: Zip Code 4005 Wrightwood Road Austin, TX 78722				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consulting Fees		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/10/2011	Payee name Tram Stop Shell				
Amount (\$) \$10.00	Payee address City: State: Zip Code 3201 North Lamar Boulevard Austin, TX 78705				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Ice for Event		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/09/2011	Payee name United States Postal Service				
Amount (\$) \$47.52	Payee address City: State: Zip Code 3507 North Lamar Boulevard Austin, TX 78703				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 9/10 Report: 25/27		2 FILER NAME Morrison, Laura (Mrs.)		3 ACCOUNT # (TEC filers) 00000001
4 Date 05/10/2011	5 Payee name United States Postal Service			
6 Amount (\$) \$23.76	7 Payee address City; State; Zip Code 3507 North Lamar Boulevard Austin, TX 78703			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 05/20/2011	Payee name VerticalResponse, Inc.			
Amount (\$) \$46.00	Payee address City; State; Zip Code 501 2nd Street Suite 700 San Francisco, CA 94107			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> E-mail Service	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 06/20/2011	Payee name VerticalResponse, Inc.			
Amount (\$) \$46.00	Payee address City; State; Zip Code 501 2nd Street Suite 700 San Francisco, CA 94107			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> E-Mail Service	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 05/14/2011	Payee name Wheatsville Food Co-Op			
Amount (\$) \$5.50	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) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Election Day food supplies	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 10/10 Report: 26/27		2 FILER NAME Morrison, Laura (Mrs.)		3 ACCOUNT # (TEC filers) 00000001
4 Date 05/13/2011	5 Payee name Wick, Jim			
6 Amount (\$) \$2,000.00	7 Payee address City: State; Zip Code 2611 Ektom Drive Unit D Austin, TX 78745			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 05/30/2011	Payee name Wick, Jim			
Amount (\$) \$4,500.00	Payee address City: State; Zip Code 2611 Ektom Drive Unit D Austin, TX 78745			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:

**POLITICAL EXPENDITURES
MADE FROM PERSONAL FUNDS****SCHEDULE G****EXPENDITURE CATEGORIES**Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
FeesGifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing ExpenseSalaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental ExpenseLoan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/1 Report: 27/27		2 FILER NAME Morrison, Laura (Mrs.)	3 ACCOUNT # (TEC filers) 00000001
4 Date 06/01/2011	5 Payee name AT&T		
6 Amount (\$) \$39.27 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address City: State: Zip Code P.O. Box 650574 Dallas, TX 75265		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Phone Service	

PERSONS SOLICITING CONTRIBUTIONS ON YOUR BEHALF

Name of Candidate/Officeholder: LAURA MORRISON

Enter the name and address of any person who has solicited and obtained contributions on your behalf during the reporting period of \$200 per person from five or more individuals. (This requirement does not apply to an individual who raises funds in total amount of \$5,000 or less for a candidate through a fundraising event held at the individual's residence.)

Name of person soliciting contributions	Address
*NIKELLE MEADE	5363 AUSTRAL LOOP, AUSTIN, TX 78739

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.