

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers) 00110414	2 PAGE # 1 of 63
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST Sheri MI	OFFICE USE ONLY Date Received 2014 JUL 15 PM 1:45 AUSTIN CITY CLERK RECEIVED Date Hand-delivered Date Postmarked Receipt # Amount Date Processed Date Imaged	
	NICKNAME LAST Gallo SUFFIX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 26550 Austin, TX 78755 <input type="checkbox"/> Change of Address		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST Lew MI NICKNAME LAST Little SUFFIX Jr.		
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2806 Stratford Drive Austin, TX 78746		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 480-9702		
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
9 PERIOD COVERED	Month Day Year Month Day Year 03/14/2014 THROUGH 06/30/2014		
10 ELECTION	ELECTION DATE Month Day Year 11/04/2014	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any)	12 OFFICE SOUGHT (if known) Austin City Council District 10	
GO TO PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

13 C/OH NAME Gallo, Sheri

14 ACCOUNT # (Ethics Commission filers)
00110414

15 NOTICE
FROM
POLITICAL
COMMITTEE(S)

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

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

additional pages

16 CONTRIBUTION
TOTALS

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

\$ 0.00

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

\$ 45,158.00

EXPENDITURE
TOTALS

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

\$ 0.00

4. TOTAL POLITICAL EXPENDITURES

\$ 10,264.15

CONTRIBUTION
BALANCE

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

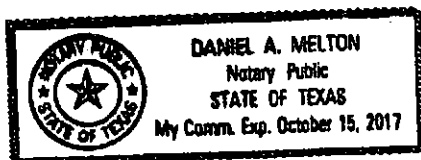
\$ 33,042.45

OUTSTANDING
LOAN TOTALS

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

\$ 0.00

17 AFFIDAVIT



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

Sheri Gallo

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Sheri Gallo, this the 15th day of July, 20 14, to certify which, witness my hand and seal of office.

[Signature]
Signature of officer administering oath

DANIEL MELTON
Print name of officer administering oath

Notary
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: 1/53 Report: 3/63	
2 FILER NAME Gallo, Sheri				3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/26/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Adkins, Debra		7 Amount of contribution (\$) \$175.00	8 In-kind contribution description (if applicable)	
6 Contributor address; City; State; Zip Code 6624 Dogwood Creek Drive Austin, TX 78746			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date 06/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Adkins, Tom		Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 6624 Dogwood Creek Drive Austin, TX 78746			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 05/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Allman, John		Amount of contribution (\$) \$125.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 3100 Rivercrest Avenue Austin, TX 78746			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 05/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Allman, Kay		Amount of contribution (\$) \$125.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 3100 Rivercrest Avenue Austin, TX 78746			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Allman, Kay		Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) Food for event	
Contributor address; City; State; Zip Code 3100 Rivercrest Avenue Austin, TX 78746			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
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: 2/53 Report: 4/63

2 FILER NAME Gallo, Sheri

3 ACCOUNT # (Ethics Commission filers)

00110414

4 Date

06/06/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Andrews, B.J.

6 Contributor address; City; State; Zip Code
4200 Jackson Avenue
Apt. 1015
Austin, TX 78731

7 Amount of
contribution (\$)

\$50.00

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

05/22/2014

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

Contributor address; City; State; Zip Code
7008 Twincrest Drive
Austin, TX 78752

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

06/30/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Austin Apartment Association PAC Committee

Contributor address; City; State; Zip Code
4107 Medical Parkway
#100
Austin, TX 78756

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)

Employer (See Instructions)

Date

06/06/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Barrett, Chad B.

Contributor address; City; State; Zip Code
4213 Waters Edge Cove
Austin, TX 78731-5139

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
N/A

Date

06/16/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Bartlett, Cherry K.

Contributor address; City; State; Zip Code
2508 Greenlee
#1
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: 3/53 Report: 5/63

2 FILER NAME Gallo, Sheri

3 ACCOUNT # (Ethics Commission filers)

00110414

4 Date

06/16/2014

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

6 Contributor address; City; State; Zip Code
2508 Greenlee
#1
Austin, TX 78703

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

06/16/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Barton, Lydia Wommack

Contributor address; City; State; Zip Code
1407 Wathen Avenue
Austin, TX 78703

Amount of
contribution (\$)

\$175.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/16/2014

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

Contributor address; City; State; Zip Code
1407 Wathen Avenue
Austin, TX 78703

Amount of
contribution (\$)

\$175.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/20/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Beck, Amanda M.

Contributor address; City; State; Zip Code
PO Box 50250
Austin, TX 78763

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)
Investments

Employer (See Instructions)
Self

Date

06/29/2014

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

Contributor address; City; State; Zip Code
7716 Basil Drive
Austin, TX 78750

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: 4/53 Report: 6/63	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/06/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Beck, Janis 6 Contributor address; City; State; Zip Code 7168 Las Ventanas Drive Austin, TX 78731-1816	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Sales		10 Employer (See Instructions) Self	
Date 06/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Beck, Vic Contributor address; City; State; Zip Code 7168 Las Ventanas Drive Austin, TX 78731-1816	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Self	
Date 05/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Beckworth, John Contributor address; City; State; Zip Code 98 San Jacinto Blvd. FSR-1 #2705 Austin, TX 78701	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Staff		Employer (See Instructions) The University of Texas	
Date 05/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Beckworth, Laura Contributor address; City; State; Zip Code 98 San Jacinto Blvd. FSR-1 #2705 Austin, TX 78701	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) Hobby Communications, LLC	
Date 06/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Benson, Robert D. Contributor address; City; State; Zip Code 1502 West Sixth Street Austin, TX 78703	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
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: 5/53 Report: 7/63	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/16/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Berry, Matt Sr. 6 Contributor address; City; State; Zip Code 1401 Wathen Avenue Austin, TX 78703	7 Amount of contribution (\$) \$150.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 06/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Biel, Bill Contributor address; City; State; Zip Code 5913 Lonesome Valley Trail Austin, TX 78731	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Biel, Claudia Contributor address; City; State; Zip Code 5913 Lonesome Valley Trail Austin, TX 78731	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bludau, BJ Contributor address; City; State; Zip Code 12101 Hispania Ct. Austin, TX 78727	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) Food for event (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bohls, Mary C. Contributor address; City; State; Zip Code 4100 Jackson Avenue Apt. 228 Austin, TX 78731	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/53 Report: 8/63	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/16/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Boone, Bill 6 Contributor address; City; State; Zip Code 1603 Pease Road Austin, TX 78703	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Restaurant Management & Supplier		10 Employer (See Instructions) Food Service Management Systems	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bostick, Francis Helen Contributor address; City; State; Zip Code 4700 Cat Mountain Drive Austin, TX 78731	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bower, Peggy Contributor address; City; State; Zip Code 4001 Far West Blvd. Austin, TX 78731	Amount of contribution (\$) \$74.00	In-kind contribution description (if applicable) Food for event
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Boykin, Cue Contributor address; City; State; Zip Code 3621 Windsor Road Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 06/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Boykin, Dorothy Contributor address; City; State; Zip Code 3621 Windsor Road Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/53 Report: 9/63	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/06/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bray, Judy 6 Contributor address; City; State; Zip Code #2 Greens Lane Austin, TX 78703	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Retired		10 Employer (See Instructions) N/A	
Date 06/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bray, Terry Contributor address; City; State; Zip Code #2 Greens Lane Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Graves, Dougherty, Hearon, & Moody	
Date 05/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Breland, O.Philip Jr. Contributor address; City; State; Zip Code 1516 Parkway Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self	
Date 05/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brown, J. Tim Contributor address; City; State; Zip Code 2201 B Exposition Blvd. Austin, TX 78703	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brown, Lynda Contributor address; City; State; Zip Code 2201 B Exposition Blvd. Austin, TX 78703	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
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: 8/53 Report: 10/63	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 05/14/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Browning, Courtney 6 Contributor address; City; State; Zip Code 2713 Trail of Madrones Austin, TX 78746-2344	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 06/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Burdette, Carol Contributor address; City; State; Zip Code 3009 Gilbert Street Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 06/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Burdette, Milo Contributor address; City; State; Zip Code 3009 Gilbert Street Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Barshop & Oles	
Date 06/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Butler, Ann S. Contributor address; City; State; Zip Code Two Niles Road Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 05/29/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Carden, Amber Contributor address; City; State; Zip Code 10807 San Souci Place Austin, TX 78759	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
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: 9/53 Report: 11/63	
2 FILER NAME Gallo, Sheri				3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 05/21/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Carothers, David D.		7 Amount of contribution (\$) \$150.00	8 In-kind contribution description (if applicable)	
6 Contributor address; City; State; Zip Code 6114 Prestonshire Lane Dallas, TX 75225			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date 06/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chamberlain, Paul		Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 3500 Native Dancer Cove Austin, TX 78746-1434			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 06/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chamberlain, Vicki		Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 3500 Native Dancer Cove Austin, TX 78746-1434			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 06/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chaney, Joyce		Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 2706 Mountain Laurel Drive Austin, TX 78703			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chapman, Betty S.		Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 4206 Farhills Drive Austin, TX 78731			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
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: 10/53 Report: 12/63	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/29/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Christian, Elizabeth 6 Contributor address; City; State; Zip Code 7629 Rockpoint Drive Austin, TX 78731	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Public Relations		10 Employer (See Instructions) Elizabeth Christian & Associates Public Relations, Inc.	
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Clair, Phyllis Contributor address; City; State; Zip Code	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) Food for event (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Clark, Emory J. Contributor address; City; State; Zip Code 4105 Green Cliffs Road Austin, TX 78746	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Clark, Mary M. Contributor address; City; State; Zip Code 4105 Green Cliffs Road Austin, TX 78746	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Covert, George Contributor address; City; State; Zip Code 4100 Jackson Avenue Apt. 214 Austin, TX 78731	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
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: 11/53 Report: 13/63	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Covert, Helen 6 Contributor address; City; State; Zip Code 4100 Jackson Avenue Apt. 214 Austin, TX 78731	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Curtis, Patricia Contributor address; City; State; Zip Code 4200 Jackson Avenue Apt. 1020 Austin, TX 78731-6047	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 06/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Danks, Clyde R. Contributor address; City; State; Zip Code 7901 West Rim Drive Austin, TX 78731-1244	Amount of contribution (\$) \$75.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Davis, C. Dean Contributor address; City; State; Zip Code 3801 Balcones Drive Austin, TX 78731	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self	
Date 06/28/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Davis, Mark C. Contributor address; City; State; Zip Code 2404 Sweetbrush Drive Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Real Estate Consultant		Employer (See Instructions) Self	

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SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 12/53 Report: 14/63	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Davis, Rebecca Nelson 6 Contributor address; City; State; Zip Code 2404 Sweetbrush Drive Austin, TX 78703	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Consultant		10 Employer (See Instructions) Self	
Date 06/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Denman, Carlene Contributor address; City; State; Zip Code 327 The Hills Drive Austin, TX 78738	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Denman, Charles Contributor address; City; State; Zip Code 327 The Hills Drive Austin, TX 78738	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Diwan, Robert & Nada Contributor address; City; State; Zip Code 6002 River Downs Cove Austin, TX 78746	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dobson, Joslyn Contributor address; City; State; Zip Code 2916 Waterbank Cove Austin, TX 78746-4137	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self	

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 13/53 Report: 15/63	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/16/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Doughtie, V. L. (Mrs.) 6 Contributor address; City; State; Zip Code 1509 Woolridge Drive Austin, TX 78703	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Housewife		10 Employer (See Instructions) N/A	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ducharme, Carole C. Contributor address; City; State; Zip Code 4324 Rio Robles Austin, TX 78746	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ducharme, Gerald D. Contributor address; City; State; Zip Code 4324 Rio Robles Austin, TX 78746	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ducote, Ellen Contributor address; City; State; Zip Code 1304 Belmont Parkway Austin, TX 78703	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ducote, Lester Contributor address; City; State; Zip Code 1304 Belmont Parkway Austin, TX 78703	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 14/53 Report: 16/63	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 05/21/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dwyer, Jan Cox 6 Contributor address; City; State; Zip Code 503 Las Lomas Drive Austin, TX 78746	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Investments		10 Employer (See Instructions) Self	
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Eckhardt, Sandra Contributor address; City; State; Zip Code 106 Walnut Tree Loop Georgetown, TX 78633	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Eckhardt, Stephen Contributor address; City; State; Zip Code 106 Walnut Tree Loop Georgetown, TX 78633	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Edgar, Susan Contributor address; City; State; Zip Code 1500 West 38th Street #31 Austin, TX 78731	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Edgar, T. M. Contributor address; City; State; Zip Code 1500 West 38th Street #31 Austin, TX 78731	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 15/53 Report: 17/63	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/06/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Eichler, Elwood J. 6 Contributor address; City; State; Zip Code 4633 Far West Blvd. #4 Austin, TX 78731	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 06/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Eichler, Sue N. Contributor address; City; State; Zip Code 4633 Far West Blvd. #4 Austin, TX 78731	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Eledge, Michael Contributor address; City; State; Zip Code 3705-A Gilbert Street Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Eledge, Ruth Ann Contributor address; City; State; Zip Code 3705-A Gilbert Street Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ellmer, Mindy R. Contributor address; City; State; Zip Code 200 Congress Avenue Unit # 11E Austin, TX 78701	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Government Affairs Consultant		Employer (See Instructions) Self	

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2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/16/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Enoch, Craig 6 Contributor address; City; State; Zip Code 2614 Maria Anna Road Austin, TX 78703	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Enoch, Kay Contributor address; City; State; Zip Code 2614 Maria Anna Road Austin, TX 78703	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/27/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fariss, Lanette V. Contributor address; City; State; Zip Code 5903 Overlook Drive Austin, TX 78731	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/27/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fariss, Max Contributor address; City; State; Zip Code 5903 Overlook Drive Austin, TX 78731	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Flawn, Peter T. Contributor address; City; State; Zip Code 4100 Jackson Avenue Apt. 463 Austin, TX 78731	Amount of contribution (\$) \$125.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/06/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Flawn, Priscilla P. 6 Contributor address; City; State; Zip Code 4100 Jackson Avenue Apt. 463 Austin, TX 78731	7 Amount of contribution (\$) \$125.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Flynn, Patrick Contributor address; City; State; Zip Code 1101 Sprague Lane Austin, TX 78746-4309	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ford, Davis & Gwen Contributor address; City; State; Zip Code 704 Laurel Valley Road Austin, TX 78746	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Francois, Kim Contributor address; City; State; Zip Code 5815 Buckpasser Cove Austin, TX 78746	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Francois, Kim Contributor address; City; State; Zip Code 5815 Buckpasser Cove Austin, TX 78746	Amount of contribution (\$) \$15.00	In-kind contribution description (if applicable) Food for event (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 18/53 Report: 20/63	
2 FILER NAME Gallo, Sheri				3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/30/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Francois, Murry		7 Amount of contribution (\$) \$150.00	8 In-kind contribution description (if applicable)	
6 Contributor address; City; State; Zip Code 5815 Buckpasser Cove Austin, TX 78746			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date 05/27/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gallo, Albert E.		Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 1511 Granrey Drive Edinburg, TX 78541			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Retired			Employer (See Instructions) N/A		
Date 06/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gammon, Regan		Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 3125 Hemphill Park Austin, TX 78705			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Retired			Employer (See Instructions) N/A		
Date 06/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gammon, William III		Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 3125 Hemphill Park Austin, TX 78705			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Insurance Agent			Employer (See Instructions) William Gammon Insurance		
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gaston, Dusty		Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 4600 Ridge Oak Drive Austin, TX 78731			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 19/53 Report: 21/63	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/16/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gaston, William D. 6 Contributor address; City; State; Zip Code 4600 Ridge Oak Drive Austin, TX 78731	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Geeslin, Jeff & George Ann Contributor address; City; State; Zip Code 11 Woodstone Square Austin, TX 78703	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Giles, Vera L. Contributor address; City; State; Zip Code 3802 Bailey Ln. Apt. 2 Austin, TX 78756-3910	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/14/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gordon, Gregory Contributor address; City; State; Zip Code 503 E Market Street Lockhart, TX 78644	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Partymachines.com	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Granger, Elizabeth Butler Contributor address; City; State; Zip Code 2612 Wooldridge Drive Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Certified Public Accountant		Employer (See Instructions) Midwikis & Granger	

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 20/53 Report: 22/63	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/16/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Granger, Tom 6 Contributor address; City; State; Zip Code 2612 Wooldridge Drive Austin, TX 78703	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Investments		10 Employer (See Instructions) Self	
Date 05/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Green, Patricia B. Contributor address; City; State; Zip Code 5008 Finley Drive Austin, TX 78731	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Certified Public Accountant		Employer (See Instructions) Patricia B. Green, CPA	
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Grisebaum, John David Contributor address; City; State; Zip Code 807 Nueces Street Austin, TX 78701	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Private Investments		Employer (See Instructions) Casera Management LLC	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hajjar, Kareem Contributor address; City; State; Zip Code 714 Jessie Street Austin, TX 78704	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hajjar, Melissa Contributor address; City; State; Zip Code 714 Jessie Street Austin, TX 78704	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 21/53 Report: 23/63	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/26/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hansen, Fred 6 Contributor address; City; State; Zip Code 5816 Trailridge Drive Austin, TX 78731	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 06/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hansen, Gayle Contributor address; City; State; Zip Code 5816 Trailridge Drive Austin, TX 78731	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harper, Nancy Contributor address; City; State; Zip Code Austin, TX	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Heiser, Becky Contributor address; City; State; Zip Code 901 S. Mopac Expressway Suite 505, Bldg. 2 Austin, TX 78746	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 06/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Heiser, Robert Contributor address; City; State; Zip Code 901 S. Mopac Expressway Suite 505, Bldg. 2 Austin, TX 78746	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Architect/Developer		Employer (See Instructions) Self	

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2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/26/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hill, Brian 6 Contributor address; City; State; Zip Code 1616 Overland Stage Road Dripping Springs, TX 78620	7 Amount of contribution (\$) \$175.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 06/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hill, Shelley Contributor address; City; State; Zip Code 1616 Overland Stage Road Dripping Springs, TX 78620	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hornickel, Deborah Contributor address; City; State; Zip Code 3206 Oakmont Blvd. Austin, TX 78703	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Horton, John Contributor address; City; State; Zip Code 3111 Westlake Drive Austin, TX 78746	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Horton, Nancy Contributor address; City; State; Zip Code 3111 Westlake Drive Austin, TX 78746	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
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: 23/53 Report: 25/63	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/16/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Howard, Diane 6 Contributor address; City; State; Zip Code 3704 Meadowbank Drive Austin, TX 78703	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Howard, James Contributor address; City; State; Zip Code 3704 Meadowbank Drive Austin, TX 78703	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/15/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hudspeth, Ann Contributor address; City; State; Zip Code 8010 Stillwood Lane Austin, TX 78757	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hudspeth, John F. Contributor address; City; State; Zip Code 4100 Jackson Avenue Apt. 346 Austin, TX 78731	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hudspeth, William J. Contributor address; City; State; Zip Code 7602 Rim Cove Austin, TX 78731	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) UX Architect		Employer (See Instructions) Dell	

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SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 24/53 Report: 26/63	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/27/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hughes, Cora Lee 6 Contributor address; City; State; Zip Code 5808 Trailridge Drive Austin, TX 78731	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 06/27/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hundley, Paula Contributor address; City; State; Zip Code 3409 Taylors Drive Austin, TX 78703-1047	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ikard, Frank Contributor address; City; State; Zip Code 3226 Tarryhollow Austin, TX 78703	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ikard, Kathy Contributor address; City; State; Zip Code 3226 Tarryhollow Austin, TX 78703	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Inman, Admiral Bobby R. Contributor address; City; State; Zip Code 3200 Riva Ridge Road Austin, TX 78746	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 25/53 Report: 27/63	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/16/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Inman, Nancy 6 Contributor address; City; State; Zip Code 3200 Riva Ridge Road Austin, TX 78746	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Professor		10 Employer (See Instructions) The University of Texas	
Date 06/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jarvis, Anne G. Contributor address; City; State; Zip Code 3301 Bridle Path Austin, TX 78703-2711	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jarvis, Timothy W. Contributor address; City; State; Zip Code 3301 Bridle Path Austin, TX 78703-2711	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Johnson, Christina Contributor address; City; State; Zip Code 10926 Jollyville Road Apt. 610 Austin, TX 78759	Amount of contribution (\$) \$15.00	In-kind contribution description (if applicable) Food for event (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Johnston, Burrell D. Contributor address; City; State; Zip Code 1108 Nueces Austin, TX 78701	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 26/53 Report: 28/63	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/16/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Johnston, David 6 Contributor address; City; State; Zip Code 116 Birnam Wood Ct. Austin, TX 78746	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Applied Micro-Economist		10 Employer (See Instructions) Self	
Date 06/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Joseph, Mildred S. Contributor address; City; State; Zip Code 2511 Bridle Path Austin, TX 78703	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kelly, Mary Beth Contributor address; City; State; Zip Code 9 Pascal Lane Austin, TX 78746	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kimberlin, Sam Contributor address; City; State; Zip Code PO Box 5930 Austin, TX 78763	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 05/27/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Knight, Elizabeth B. Contributor address; City; State; Zip Code 5608 Jim Hogg Avenue #8 Austin, TX 78756	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self	

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 27/53 Report: 29/63	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 05/21/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Knight, Robert 6 Contributor address; City; State; Zip Code 307 East 2nd Austin, TX 78701	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Real Estate		10 Employer (See Instructions) Knight Real Estate	
Date 06/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kochwelp, Bill R. Contributor address; City; State; Zip Code 10101 Eastman Cove Austin, TX 78750	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self	
Date 06/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kochwelp, Jackie Contributor address; City; State; Zip Code 10101 Eastman Cove Austin, TX 78750	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 06/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kuperman, David Contributor address; City; State; Zip Code 10820 Straw Flower Drive Austin, TX 78733	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Kuperman, Orr, & Albers	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Langley, Sydney Contributor address; City; State; Zip Code 2511 McCallum Drive Austin, TX 78703	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 28/53 Report: 30/63	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/06/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Leigon, Charles W. 6 Contributor address; City; State; Zip Code 5008 Desert Oak Circle Austin, TX 78749-2216	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Retired		10 Employer (See Instructions) N/A	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Link, Jennie Contributor address; City; State; Zip Code 2400 Sweetbrush Drive Austin, TX 78703	Amount of contribution (\$) \$125.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Link, Tom Contributor address; City; State; Zip Code 2400 Sweetbrush Drive Austin, TX 78703	Amount of contribution (\$) \$125.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Little, Lew Contributor address; City; State; Zip Code 2806 Stratford Drive Austin, TX 78746-2344	Amount of contribution (\$) \$325.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Self	
Date 05/29/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Loudermilk, Brenda Contributor address; City; State; Zip Code 1604 Cliffwood Drive Austin, TX 78733	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Reitred		Employer (See Instructions) N/A	

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SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 29/53 Report: 31/63	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/16/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martine, Carol 6 Contributor address; City; State; Zip Code 836 Old Spicewood Road Cypress Mill, TX 78663	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Real Estate		10 Employer (See Instructions) Martine Properties, Inc.	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martine, Tom Contributor address; City; State; Zip Code 836 Old Spicewood Road Cypress Mill, TX 78663	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Commercial Real Estate		Employer (See Instructions) Martine Properties, Inc.	
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) May, Darlene Contributor address; City; State; Zip Code	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) Food for event (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) May, Darlene F. Contributor address; City; State; Zip Code 4553 Golf Vista Drive Austin, TX 78730	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) May, Fred T. Contributor address; City; State; Zip Code 4553 Golf Vista Drive Austin, TX 78730	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 30/53 Report: 32/63	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/30/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McDaniel, Demetrius 6 Contributor address; City; State; Zip Code 7601 Sandia Loop Austin, TX 78735	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Attorney		10 Employer (See Instructions) Greenberg Traurig, LLP	
Date 05/29/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McIlhenny, Edmund Contributor address; City; State; Zip Code 3112 Windsor Road # A329 Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) EM Consulting, Inc.	
Date 05/29/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McIlhenny, Pam Contributor address; City; State; Zip Code 3112 Windsor Road # A329 Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 05/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McKinney, Charlie Contributor address; City; State; Zip Code 21018 Mystic Stone Drive Tomball, TX 77375	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McKinney, Sydney Contributor address; City; State; Zip Code 21018 Mystic Stone Drive Tomball, TX 77375	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 31/53 Report: 33/63	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/06/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McLendon, Connie 6 Contributor address; City; State; Zip Code 4822 Twin Valley Drive Austin, TX 78731-3539	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McLendon, Connie Contributor address; City; State; Zip Code 4822 Twin Valley Drive Austin, TX 78731	Amount of contribution (\$) \$37.00	In-kind contribution description (if applicable) Food for event (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McPhail, Gail B. Contributor address; City; State; Zip Code 8546 Adirondack Trail # 4 Austin, TX 78759	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Meador, Alison Contributor address; City; State; Zip Code 3403 Southill Circle Austin, TX 78703-1045	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Meador, Jeff Contributor address; City; State; Zip Code 3403 Southill Circle Austin, TX 78703-1045	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 32/53 Report: 34/63	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Meece, Sharon 6 Contributor address; City; State; Zip Code 5315 Musket Ridge Austin, TX 78759	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Retired		10 Employer (See Instructions) N/A	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Meisler, Paul Contributor address; City; State; Zip Code 611 S. Congress Avenue Suite 510 Austin, TX 78704	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Merritt, Nancy S. Contributor address; City; State; Zip Code 4200 Jackson Avenue Apt. 1005 Austin, TX 78731	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Metzger, Dean Contributor address; City; State; Zip Code 8507 Adirondack Cove Austin, TX 78759	Amount of contribution (\$) \$87.50	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Metzger, Dean Contributor address; City; State; Zip Code 8507 Adirondack Cove Austin, TX 78759	Amount of contribution (\$) \$87.50	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 33/53 Report: 35/63	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/20/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Metzger, Julie 6 Contributor address; City; State; Zip Code 8507 Adirondack Cove Austin, TX 78759	7 Amount of contribution (\$) \$87.50	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 06/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Metzger, Julie Contributor address; City; State; Zip Code 8507 Adirondack Cove Austin, TX 78759	Amount of contribution (\$) \$87.50	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/28/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Miller, David Contributor address; City; State; Zip Code 8200 Neely #122 Austin, TX 78759	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Miller, Eugenia B. Contributor address; City; State; Zip Code 1510 Gaston Avenue Austin, TX 78703-2419	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Miller, Mary Jo Contributor address; City; State; Zip Code 2500 Barton Creek Blvd. Apt. 3214 Austin, TX 78735	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 34/53 Report: 36/63	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 05/29/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Monroe, Putnam W. 6 Contributor address; City; State; Zip Code 4705 Balcones Drive Austin, TX 78731	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moody, Ann H. Contributor address; City; State; Zip Code 3234 Tarryhollow Drive Austin, TX 78703	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 06/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) More, George Contributor address; City; State; Zip Code 2904 Hillview Road Austin, TX 78703	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) More, Marion Contributor address; City; State; Zip Code 2904 Hillview Road Austin, TX 78703	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morrison, Patricia A. Contributor address; City; State; Zip Code 1804 Rockmoor Avenue Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 35/53 Report: 37/63	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/26/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morrison, Selma 6 Contributor address; City; State; Zip Code 4211 Canoas Drive Austin, TX 78730	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Pharmacist		10 Employer (See Instructions) HCA-/St. David's Hospital	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Muse, Ellen C. Contributor address; City; State; Zip Code 5802 Kentucky Derby Austin, TX 78746	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Muse, Ewell H. Contributor address; City; State; Zip Code 5802 Kentucky Derby Austin, TX 78746	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nash, Dorothy Contributor address; City; State; Zip Code Austin, TX	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nash, John H. Contributor address; City; State; Zip Code 5818 Trailridge Drive Austin, TX 78731	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Ellis & Salazar	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 36/53 Report: 38/63	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/30/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Needham, John 6 Contributor address; City; State; Zip Code 100 Congress # 1540 Austin, TX 78701	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Real Estate		10 Employer (See Instructions) Riverside Resources	
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Neff, John Contributor address; City; State; Zip Code 5820 Trailridge Drive Austin, TX 78731	Amount of contribution (\$) \$125.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Neff, Keni Contributor address; City; State; Zip Code 5820 Trailridge Drive Austin, TX 78731	Amount of contribution (\$) \$125.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/28/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nellor, Don Contributor address; City; State; Zip Code 4024 Walnut Clay Drive Austin, TX 78731	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 05/28/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nellor, Margaret Contributor address; City; State; Zip Code 4024 Walnut Clay Drive Austin, TX 78731	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Environmental Engineer		Employer (See Instructions) Nellor Environmental Engineer	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 37/53 Report: 39/63	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/30/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nelson, Amy 6 Contributor address; City; State; Zip Code 3 Jasperwood Court Austin, TX 78738	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable) Food for event (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 06/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Newsom, Beverly Contributor address; City; State; Zip Code 4102 Aqua Verde Drive Austin, TX 78746	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Newsom, Gary Contributor address; City; State; Zip Code 4102 Aqua Verde Drive Austin, TX 78746	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Norman, Ann Contributor address; City; State; Zip Code 600 West 10th Street Apt. 740 Austin, TX 78701	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Norman, Bill Contributor address; City; State; Zip Code 600 West 10th Street Apt. 740 Austin, TX 78701	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
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: 38/53 Report: 40/63	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/16/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Norwood, Barbara 6 Contributor address; City; State; Zip Code 2908 Clearview Drive Austin, TX 78703	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Norwood, Robert E. Contributor address; City; State; Zip Code 2908 Clearview Drive Austin, TX 78703	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Oswalt, Cathy Contributor address; City; State; Zip Code 1503 Marshall Lane Austin, TX 78703	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Oswalt, Chuck Contributor address; City; State; Zip Code 1503 Marshall Lane Austin, TX 78703	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Page, Lolla McNutt Contributor address; City; State; Zip Code 3300 Mount Bonnell Drive Austin, TX 78731	Amount of contribution (\$) \$75.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
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: 39/53 Report: 41/63	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/16/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Page, William Holland Sr. 6 Contributor address; City; State; Zip Code 3300 Mount Bonnell Drive Austin, TX 78731	7 Amount of contribution (\$) \$75.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 06/27/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Patten, Preston Contributor address; City; State; Zip Code 4201 Churchill Downs Drive Austin, TX 78746-1103	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) N/A	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Patton, William John Contributor address; City; State; Zip Code 2716 Hillview Green Lane Austin, TX 78703	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Penn, Dorothy L. Contributor address; City; State; Zip Code 4100 Jackson Avenue Apt. 433 Austin, TX 78731	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Perry, Christopher Contributor address; City; State; Zip Code 2906 Cherry Lane Austin, TX 78703-2822	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Aquila Real Estate	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 40/53 Report: 42/63	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 05/08/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Perry, Edgar (Mr.) 6 Contributor address; City; State; Zip Code 5905 Overlook Drive Austin, TX 78731	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Retired		10 Employer (See Instructions) N/A	
Date 06/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Perry, Lauri Contributor address; City; State; Zip Code 2906 Cherry Lane Austin, TX 78703-2822	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) None	
Date 05/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Perry, Linda (Mrs.) Contributor address; City; State; Zip Code 5905 Overlook Drive Austin, TX 78731	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 06/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Perry, Melissa Contributor address; City; State; Zip Code 7706 Rustling Road Austin, TX 78731-1336	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Self	
Date 06/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Perry, Ryan Contributor address; City; State; Zip Code 7706 Rustling Road Austin, TX 78731-1336	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 41/53 Report: 43/63	
2 FILER NAME Gallo, Sheri				3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Peterson, LaTrelle		7 Amount of contribution (\$) \$50.00		8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 6203 Cat MountainCove Austin, TX 78731			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date 06/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Peterson, Ralph		Amount of contribution (\$) \$50.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 6203 Cat MountainCove Austin, TX 78731			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 06/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Plum, Jon M.		Amount of contribution (\$) \$30.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 5806 Trailridge Drive Austin, TX 78731			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 06/05/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Price, Robert		Amount of contribution (\$) \$52.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4016 Sierra Drive Austin, TX 78731			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 05/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Puett, Caroline Cardwell		Amount of contribution (\$) \$350.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 108 Bluff Park Circle Austin, TX 78746			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Investments			Employer (See Instructions) Self		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 42/53 Report: 44/63	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/06/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Puett, Nelson Harwood 6 Contributor address; City; State; Zip Code Austin, TX	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Real Estate/Insurance		10 Employer (See Instructions) Self	
Date 05/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ramsey, Francis M. Contributor address; City; State; Zip Code 515 Congress Avenue Suite 1900 Austin, TX 78701	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self	
Date 05/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ramsey, George E. III Contributor address; City; State; Zip Code 515 Congress Avenue Suite 1900 Austin, TX 78701	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self	
Date 06/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rechner, Melani Contributor address; City; State; Zip Code 5908 Overlook Austin, TX 78731	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 06/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rhodes, Sonny Contributor address; City; State; Zip Code 6506 Mesa Drive Austin, TX 78731	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 43/53 Report: 45/63	
2 FILER NAME Gallo, Sheri				3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rider, Kathy T.		7 Amount of contribution (\$) \$75.00	8 In-kind contribution description (if applicable)	
6 Contributor address; City; State; Zip Code 3221 Clearview Drive Austin, TX 78703-2753			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date 06/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rider, Kent M.		Amount of contribution (\$) \$75.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 3221 Clearview Drive Austin, TX 78703-2753			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Robbins, Pat Sweeney		Amount of contribution (\$) \$35.00	In-kind contribution description (if applicable) Food for event	
Contributor address; City; State; Zip Code 11017 Casitas Drive Austin, TX 78717			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 06/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Robinson, John Oscar		Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 1408 Wathen Avenue Austin, TX 78703			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Manager			Employer (See Instructions) Austin White Lime		
Date 06/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Robinson, Nancy		Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 1408 Wathen Avenue Austin, TX 78703			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Retired			Employer (See Instructions) N/A		

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SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 44/53 Report: 46/63	
2 FILER NAME Gallo, Sheri				3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/16/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rogers, George Anne		7 Amount of contribution (\$) \$300.00	8 In-kind contribution description (if applicable)	
6 Contributor address; City; State; Zip Code 3201 Pecos Street # 7 Austin, TX 78703			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions) Retired			10 Employer (See Instructions) N/A		
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Roland, Bill		Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 808 W. 10th Street Austin, TX 78701			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Owner			Employer (See Instructions) Granite Properties of Texas		
Date 05/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ruggero, Peter		Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 2413 Winsted Lane Austin, TX 78703			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Attorney			Employer (See Instructions) Ruggero Law Firm		
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sain, David		Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 8714 Silverhill Lane Austin, TX 78759			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Scurlock, Jan		Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 4103 Mesa Court Austin, TX 78731			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		

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SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 45/53 Report: 47/63	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/16/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Scurlock, John C. 6 Contributor address; City; State; Zip Code 4103 Mesa Court Austin, TX 78731	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 06/28/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shipnes, Joan Contributor address; City; State; Zip Code 5811 Kentucky Derby Austin, TX 78746	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/28/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shipnes, Stuart Contributor address; City; State; Zip Code 5811 Kentucky Derby Austin, TX 78746	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Simmons, Joseph B. Contributor address; City; State; Zip Code 609 West Lynn Unit 4 Austin, TX 78703	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Simmons, Leigh H. Contributor address; City; State; Zip Code 609 West Lynn Unit 4 Austin, TX 78703	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
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: 46/53 Report: 48/63	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/06/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Skinner, LeAnne 6 Contributor address; City; State; Zip Code 4177 Honeycomb Rock Cr. Austin, TX 78731	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Dietitian		10 Employer (See Instructions) Self	
Date 06/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Skinner, Steve Contributor address; City; State; Zip Code 4177 Honeycomb Rock Cr. Austin, TX 78731	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Skinner Transportation	
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Eddie Contributor address; City; State; Zip Code 101 Loblolly Elgin, TX 78621	Amount of contribution (\$) \$30.00	In-kind contribution description (if applicable) Food for event (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 06/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Elora Contributor address; City; State; Zip Code 1130 Camino La Costa Apt. 143 Austin, TX 78752-3984	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Ralph M. Contributor address; City; State; Zip Code 6000 Mountain Villa Drive Austin, TX 78731	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 47/53 Report: 49/63	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/16/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Standerfer, J. Brent 6 Contributor address; City; State; Zip Code 7929 Mesa Trails Circle Austin, TX 78731	7 Amount of contribution (\$) \$75.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Starling, Don R. Contributor address; City; State; Zip Code 445 Kandus Cove China Spring, TX 76633	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Starling, Sunny L. Contributor address; City; State; Zip Code 445 Kandus Cove China Spring, TX 76633	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stone, Gay Gillen Contributor address; City; State; Zip Code 3201 B Hillview Road Austin, TX 78703	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stone, Sam V. Contributor address; City; State; Zip Code 23 Woodstone Square Austin, TX 78703	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
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: 48/53 Report: 50/63	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/27/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sullivan, Mary E. 6 Contributor address; City; State; Zip Code 7204 Montana Norte Austin, TX 78731	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sullivan, Mary E. Contributor address; City; State; Zip Code 7204 Montana Norte Austin, TX 78731	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) Food for event (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Thomson, Lois R. Contributor address; City; State; Zip Code 801 Cedar Park Drive Austin, TX 78746	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Housewife		Employer (See Instructions) N/A	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Thomson, William K. Contributor address; City; State; Zip Code 801 Cedar Park Drive Austin, TX 78746	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Dentist		Employer (See Instructions) Self	
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Todd, Bruce Contributor address; City; State; Zip Code 823 Congress Suite 1505 Austin, TX 78701	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Commissioner		Employer (See Instructions) Travis County	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 49/53 Report: 51/63	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/26/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Townsend, Jean 6 Contributor address; City; State; Zip Code 2906 B Windsor Austin, TX 78703-2346	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Investments		10 Employer (See Instructions) Self	
Date 05/27/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Triplett, Jennifer Contributor address; City; State; Zip Code 1511 Granrey Drive Edinburg, TX 78541	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Trotter, J. David Contributor address; City; State; Zip Code 2499 S. Capital of Texas Hwy. Suite A-107 Austin, TX 78746	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self	
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Villegas, Gustavo Contributor address; City; State; Zip Code 20308 Crooked Stick Drive Pflugerville, TX 78660-8195	Amount of contribution (\$) \$37.50	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Villegas, Karen M. Contributor address; City; State; Zip Code 20308 Crooked Stick Drive Pflugerville, TX 78660-8195	Amount of contribution (\$) \$37.50	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
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: 50/53 Report: 52/63	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/16/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Walker, Auddie 6 Contributor address; City; State; Zip Code 2303 Cheseick Ct. #26 Austin, TX 78746	7 Amount of contribution (\$) \$125.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 05/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Walker, Donald S. Contributor address; City; State; Zip Code 4408 Long Champ Drive #26 Austin, TX 78746	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self	
Date 05/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Walker, Margaret R. Contributor address; City; State; Zip Code 4408 Long Champ Drive #26 Austin, TX 78746	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Walker, Philip Contributor address; City; State; Zip Code 2303 Cheseick Ct. #26 Austin, TX 78746	Amount of contribution (\$) \$125.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/29/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wells, Benjamin Contributor address; City; State; Zip Code 5901 Saratoga Cove Austin, TX 78746	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) UCS	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 51/53 Report: 53/63	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/16/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) White, Barbara W. 6 Contributor address; City; State; Zip Code 5308 Wishek Cove Austin, TX 78730	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Whitworth, Edna Contributor address; City; State; Zip Code 2904 Glenview Austin, TX 78703	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wicall, Kay Contributor address; City; State; Zip Code 6301 Mountainclimb Drive Austin, TX 78731-3907	Amount of contribution (\$) \$20.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wiley, Tim Contributor address; City; State; Zip Code 7505 Parkview Circle Austin, TX 78731	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self	
Date 06/27/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wilson, Rogers D. Contributor address; City; State; Zip Code 5902 N West Place Austin, TX 78731-3659	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1. PAGE # Schedule: 52/53 Report: 54/63	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/16/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Winn, Anne 6 Contributor address; City; State; Zip Code 3807 Toro Canyon Road # 9 Austin, TX 78746	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Winn, Jerry Contributor address; City; State; Zip Code 3807 Toro Canyon Road # 9 Austin, TX 78746	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Womack,Carolynn H. Contributor address; City; State; Zip Code 2905 Round Table Road Austin, TX 78746	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 06/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Womack, Eva Contributor address; City; State; Zip Code 4305 Waterford Place Austin, TX 78731	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 06/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Womack, Marvin Contributor address; City; State; Zip Code 4305 Waterford Place Austin, TX 78731	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 53/53 Report: 55/63	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 06/20/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Worob, Marc J. 6 Contributor address; City; State; Zip Code 4604 West Rim Cove Austin, TX 78731	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 06/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Worob, Phyllis Contributor address; City; State; Zip Code 4604 West Rim Cove Austin, TX 78731	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Zayas, Luis H. Contributor address; City; State; Zip Code 3803 Tonkawa Trail # 1 Austin, TX 78756	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Dean		Employer (See Instructions) University of Texas	

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: 1/8 Report: 56/63		2 FILER NAME Gallo, Sheri		3 ACCOUNT # (TEC filers) 00110414	
4 Date 06/16/2014	5 Payee name BBVA Compass Bank				
6 Amount (\$) \$3.00	7 Payee address City: State: Zip Code PO Box 10566 Birmingham, AL 35296				
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 T) <input type="checkbox"/> Paper statement fee		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 06/07/2014	Payee name Costco				
Amount (\$) \$67.92	Payee address City: State: Zip Code 10401 Research Blvd. Austin, TX 78759				
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 & beverage for event		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 06/23/2014	Payee name Costco				
Amount (\$) \$176.94	Payee address City: State: Zip Code 10401 Research Blvd. Austin, TX 78759				
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 and beverage for event		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/14/2014	Payee name Democracy Engine LLC				
Amount (\$) \$62.11	Payee address City: State: Zip Code 850 Quincy Street # 402 Washington, DC 20011				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Website donation 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: 2/8 Report: 57/63		2 FILER NAME Gallo, Sheri		3 ACCOUNT # (TEC filers) 00110414	
4 Date 05/14/2014	5 Payee name Democracy Engine LLC				
6 Amount (\$) \$1.13	7 Payee address City: State: Zip Code 850 Quincy Street # 402 Washington, DC 20011				
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 T) <input type="checkbox"/> Website donation fees		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/28/2014	Payee name Democracy Engine LLC				
Amount (\$) \$45.04	Payee address City: State: Zip Code 850 Quincy Street # 402 Washington, DC 20011				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Website donation fees		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 06/04/2014	Payee name Democracy Engine LLC				
Amount (\$) \$2.15	Payee address City: State: Zip Code 850 Quincy Street # 402 Washington, DC 20011				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Website donation fees		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 06/11/2014	Payee name Democracy Engine LLC				
Amount (\$) \$9.57	Payee address City: State: Zip Code 850 Quincy Street # 402 Washington, DC 20011				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Website donation 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: 3/8 Report: 58/63		2 FILER NAME Gallo, Sheri		3 ACCOUNT # (TEC filers) 00110414	
4 Date 06/18/2014	5 Payee name Democracy Engine LLC				
6 Amount (\$) \$13.32	7 Payee address City: State: Zip Code 850 Quincy Street # 402 Washington, DC 20011				
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 T) <input type="checkbox"/> Website donation fees		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 06/09/2014	Payee name Follico, Vinnie				
Amount (\$) \$200.00	Payee address City: State: Zip Code 1901 Woodland Avenue # B Austin, TX 78741				
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 for event		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 06/17/2014	Payee name GoDaddy				
Amount (\$) \$47.88	Payee address City: State: Zip Code GoDaddy.com				
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"/> Email Provider		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/21/2014	Payee name IREM				
Amount (\$) \$45.00	Payee address City: State: Zip Code PO Box 91028 Austin, TX 78709				
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/Fundraising Planning		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 4/8 Report: 59/63		2 FILER NAME Gallo, Sheri		3 ACCOUNT # (TEC filers) 00110414	
4 Date 05/21/2014	5 Payee name Nation Builder				
6 Amount (\$) \$19.00	7 Payee address City: State: Zip Code nationbuilder.com				
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"/> Website Hosting		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 06/17/2014	Payee name NWACA				
Amount (\$) \$25.00	Payee address City: State: Zip Code PO Box 26554 Austin, TX 78755				
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"/> Parade Vehicle Fee		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/21/2014	Payee name Office Depot				
Amount (\$) \$189.43	Payee address City: State: Zip Code 2620 W. Anderson Lane Austin, TX 78757				
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"/> Software		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/21/2014	Payee name Office Depot				
Amount (\$) \$124.48	Payee address City: State: Zip Code 2620 W. Anderson Lane Austin, TX 78757				
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"/> HP Printer		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 5/8 Report: 60/63		2 FILER NAME Gallo, Sheri		3 ACCOUNT # (TEC filers) 00110414	
4 Date 05/21/2014	5 Payee name Office Depot				
6 Amount (\$) \$77.92	7 Payee address City: State: Zip Code 2620 W. Anderson Lane Austin, TX 78757				
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"/> Office Supplies		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/21/2014	Payee name Office Depot				
Amount (\$) \$21.64	Payee address City: State: Zip Code 2620 W. Anderson Lane Austin, TX 78757				
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 06/05/2014	Payee name Office Depot				
Amount (\$) \$266.18	Payee address City: State: Zip Code 2620 W. Anderson Lane Austin, TX 78757				
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"/> Supplies for event		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 06/04/2014	Payee name Paragon Printing				
Amount (\$) \$3,984.90	Payee address City: State: Zip Code 10423 McKalla Place Austin, TX 78758				
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"/> Invitations for fundraiser		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 6/8 Report: 61/63		2 FILER NAME Gallo, Sheri		3 ACCOUNT # (TEC filers) 00110414	
4 Date 06/04/2014	5 Payee name Paragon Printing				
6 Amount (\$) \$1,041.10	7 Payee address City: State: Zip Code 10423 McKalla Place Austin, TX 78758				
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 06/26/2014	Payee name Paragon Printing				
Amount (\$) \$202.09	Payee address City: State: Zip Code 10423 McKalla Place Austin, TX 78758				
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 to Mail Fundraiser Invitations		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 06/26/2014	Payee name Paragon Printing				
Amount (\$) \$56.83	Payee address City: State: Zip Code 10423 McKalla Place Austin, TX 78758				
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"/> Printing/Poster for Fundraiser		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 06/30/2014	Payee name Perry Company				
Amount (\$) \$100.00	Payee address City: State: Zip Code 3921 Steck Avenue Suite A115 Austin, TX 78759				
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"/> Rent on office space		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION Guide explains how to complete this form.

1 PAGE # Schedule: 7/8 Report: 62/63		2 FILER NAME Gallo, Sheri		3 ACCOUNT # (TEC filers) 00110414	
4 Date 06/30/2014	5 Payee name Thompson & Knight, LLP				
6 Amount (\$) \$2,500.00	7 Payee address City: State: Zip Code 98 San Jacinto Blvd. Suite 1900 Austin, TX 78701				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Legal Services		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Attorney consultation		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/21/2014	Payee name US Post Office Chimney Corners Station				
Amount (\$) \$6.15	Payee address City: State: Zip Code 3575 Far West Blvd. Austin, TX 78731				
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:
Date 06/11/2014	Payee name US Post Office Chimney Corners Station				
Amount (\$) \$196.00	Payee address City: State: Zip Code 3575 Far West Blvd. Austin, TX 78731				
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 for Fundraiser		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/21/2014	Payee name Walmart				
Amount (\$) \$746.89	Payee address City: State: Zip Code 2525 W. Anderson Lane Austin, TX 78757				
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"/> Laptop		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 8/8 Report: 63/63		2 FILER NAME Gallo, Sheri		3 ACCOUNT # (TEC filers) 00110414
4 Date 06/26/2014	5 Payee name Worley Printing			
6 Amount (\$) \$32.48	7 Payee address City; State; Zip Code 3217 N. IH 35 Austin, TX 78722			
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"/> Logo Design	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held: