

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) 00005000	2 PAGE # 1 of 76
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Ms.	FIRST Kathryne	MI
	NICKNAME Kathie	LAST Tovo	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX:	APT / SUITE #:	CITY: STATE: ZIP CODE
	809 W 32nd Street Austin, TX 78705		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Joseph	MI
	NICKNAME	LAST Pinnelli	SUFFIX
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE		
P.O. Box 50038 Austin, TX 78763			
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
(512) 478-5958			
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
01/01/2014		THROUGH	06/30/2014
10 ELECTION	ELECTION DATE Month Day Year		ELECTION TYPE
11/04/2014		<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any) City Council Place 3		12 OFFICE SOUGHT (if known) City Council District 9
GO TO PAGE 2			

OFFICE USE ONLY

Date Received

2014 JUL 15

AUSTIN CITY CLERK
RECEIVED

Date Hand-delivered or Date Postmarked

PM 2 59

Receipt #

Amount

Date Processed

Date Imaged

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

**FORM C/OH
COVER SHEET PG 2**

13 C/OH NAME Tovo, Kathrynne (Ms.)

14 ACCOUNT # (Ethics Commission filers)
00005000

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
<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS
<input type="checkbox"/> 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
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2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	41,332.00
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EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	0.00
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4. TOTAL POLITICAL EXPENDITURES	\$	35,696.88
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CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	30,796.64
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OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	76,807.06
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17 AFFIDAVIT



AFFIX NOTARY STAMP HERE ABOVE

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.

Kathrynne B Tovo
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Katherine B. Tovo, this the 14 day of July, 2014, to certify which, witness my hand and seal of office.

[Signature]
Signature of officer administering oath

Jesus Antonio Becerra
Print name of officer administering oath

Notary Public
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: 1/51 Report: 3/76	
2 FILER NAME Tovo, Kathryn (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 06/30/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Akers, Larry (Mr.) 6 Contributor address; City; State; Zip Code 2311 Ridgeview Austin, TX 78704	7 Amount of contribution (\$) \$20.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions)			
Date 06/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Anderson, Jamie (Ms.) Contributor address; City; State; Zip Code 1213 West 12th Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retail Owner		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) Anderson's Coffee Company			
Date 06/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Anschutz, Kent (Mr.) Contributor address; City; State; Zip Code 1006 Reagan Terrace Austin, TX 78704	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) Self-Employed			
Date 05/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Armstrong, Gail (Mr.) Contributor address; City; State; Zip Code 911 Daniel Dr. Austin, TX 78704	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ausley, Robbie (Mr.) Contributor address; City; State; Zip Code 3707 Laurel Ledge Ln. Austin, TX 78731	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
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: 2/51 Report: 4/76	
2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 06/15/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Badgett, Becky (Ms.) 6 Contributor address; City; State; Zip Code 2107 Alameda Austin, TX 78704	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 06/29/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Baer, Therese (Ms.) Contributor address; City; State; Zip Code 7756 Northcross Dr. Austin, TX 78757	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) Professional Engineer		Employer (See Instructions) Baer Engineering & Environmental Consulting, Inc.	
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bailey, Donna (Ms.) Contributor address; City; State; Zip Code 2003 Forest Trail Austin, TX 78703	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 06/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bailey, Kris (Mr.) Contributor address; City; State; Zip Code 8418 Spring Valley Dr Austin, TX 78736	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) Insurance Adjuster		Employer (See Instructions) Self-Employed	
Date 06/28/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Balaka, Gerald (Mr.) Contributor address; City; State; Zip Code 1800 W 34th St 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)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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

1 PAGE #
Schedule: 3/51 Report: 5/76

2 FILER NAME Tovo, Kathryn (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00005000

4 Date **5** Full name of contributor out-of-state PAC (ID# _____)
06/27/2014 Barkley, John (Mr.)

7 Amount of contribution (\$) **8** In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
3118 Wheeler
Austin, TX 78705

\$350.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)
Real Estate Investments

10 Employer (See Instructions)
Self-Employed

Date Full name of contributor out-of-state PAC (ID# _____)
06/03/2014 Basciano, Joyce (Ms.)

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

Contributor address; City; State; Zip Code
1907 W 34th St.
Austin, TX 78703

\$50.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
06/03/2014 Beers, Joseph (Mr.)

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

Contributor address; City; State; Zip Code
8522 Woodstone Dr.
Austin, TX 78757

\$350.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Taxi Driver

Employer (See Instructions)
Self-Employed

Date Full name of contributor out-of-state PAC (ID# _____)
06/26/2014 Biedrzycki, Carol (Ms.)

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

Contributor address; City; State; Zip Code
1411 Gracy Farms Ln #23
Austin, TX 78758

\$50.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
06/04/2014 Blake, Mark (Mr.)

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

Contributor address; City; State; Zip Code
2006 South Oak Canyon Rd.
Austin, TX 78746

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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

1 PAGE #
Schedule: 4/51 Report: 6/76

2 FILER NAME Tovo, Kathryn (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00005000

4 Date 06/03/2014 **5 Full name of contributor** out-of-state PAC (ID# _____)
Blythe, Sharon (Ms.)

6 Contributor address; City; State; Zip Code
9206 Brigadoon Cove
Austin, TX 78750

7 Amount of contribution (\$) | **8 In-kind contribution description (if applicable)**
\$25.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date 06/21/2014 **Full name of contributor** out-of-state PAC (ID# _____)
Breier Day, Barbara (Ms.)

Contributor address; City; State; Zip Code
710 Colorado
#3H
Austin, TX 78701

Amount of contribution (\$) | **In-kind contribution description (if applicable)**
\$50.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 06/18/2014 **Full name of contributor** out-of-state PAC (ID# _____)
Bridges, Barbara (Ms.)

Contributor address; City; State; Zip Code
1106 W 22 1/2 St
Austin, TX 78705

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

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 06/27/2014 **Full name of contributor** out-of-state PAC (ID# _____)
Brotherton, Kathryn (Ms.)

Contributor address; City; State; Zip Code
1108 Woodland Ave.
Austin, TX 78704

Amount of contribution (\$) | **In-kind contribution description (if applicable)**
\$12.50

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 06/27/2014 **Full name of contributor** out-of-state PAC (ID# _____)
Brotherton, Richard (Mr.)

Contributor address; City; State; Zip Code
1108 Woodland Ave.
Austin, TX 78704

Amount of contribution (\$) | **In-kind contribution description (if applicable)**
\$12.50

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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

1 PAGE #
Schedule: 5/51 Report: 7/76

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00005000

4 Date
06/26/2014

5 Full name of contributor out-of-state PAC (ID# _____)
Brown, Sharon (Ms.)

6 Contributor address; City; State; Zip Code
4213 Ave. F
Austin, TX 78751

7 Amount of contribution (\$) | **8** In-kind contribution description (if applicable)
\$100.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date
06/03/2014

Full name of contributor out-of-state PAC (ID# _____)
Bunch, William (Mr.)

Contributor address; City; State; Zip Code
1307 Oxford Ave
Austin, TX 78704

Amount of contribution (\$) | In-kind contribution description (if applicable)
\$200.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Save Our Springs Alliance

Date
06/17/2014

Full name of contributor out-of-state PAC (ID# _____)
Burch, David R. (Mr.)

Contributor address; City; State; Zip Code
900 North River Hills Rd
Austin, TX 78733

Amount of contribution (\$) | In-kind contribution description (if applicable)
\$350.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Real Estate

Employer (See Instructions)
Self-Employed

Date
06/17/2014

Full name of contributor out-of-state PAC (ID# _____)
Burch, Phyllis (Mrs.)

Contributor address; City; State; Zip Code
900 North River Hills Rd
Austin, TX 78733

Amount of contribution (\$) | In-kind contribution description (if applicable)
\$350.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Homemaker

Employer (See Instructions)
N/A

Date
06/03/2014

Full name of contributor out-of-state PAC (ID# _____)
Burkhardt, William (Mr.)

Contributor address; City; State; Zip Code
802 Christopher St.
Austin, TX 78704

Amount of contribution (\$) | In-kind contribution description (if applicable)
\$200.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Architect

Employer (See Instructions)
Self-Employed

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 6/51 Report: 8/76

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/06/2014

5 Full name of contributor out-of-state PAC (ID# _____)
Burton, Amon (Mr.)

6 Contributor address; City; State; Zip Code
4200 Avenue G
Austin, TX 78751

7 Amount of contribution (\$)

\$350.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)
Attorney

10 Employer (See Instructions)
Self-Employed

Date

06/30/2014

Full name of contributor out-of-state PAC (ID# _____)
Butler, Joy (Ms.)

Contributor address; City; State; Zip Code
2028 Emma Long Street
Austin, TX 78723

Amount of contribution (\$)

\$150.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/27/2014

Full name of contributor out-of-state PAC (ID# _____)
Campbell, Sarah (Ms.)

Contributor address; City; State; Zip Code
1201 Woodland Ave
Austin, TX 78704

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/30/2014

Full name of contributor out-of-state PAC (ID# _____)
Carbone, Kata (Ms.)

Contributor address; City; State; Zip Code
2710 West 49th 1/2 St
Austin, TX 78731

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

06/03/2014

Full name of contributor out-of-state PAC (ID# _____)
Carlson, Michelle (Ms.)

Contributor address; City; State; Zip Code
903 W 31st
Austin, TX 78705

Amount of contribution (\$)

\$50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/51 Report: 9/76	
2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 06/29/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Carpenter, Sue (Ms.) 6 Contributor address; City; State; Zip Code 3028 Sunland Austin, TX 78748	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable)
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# _____) Cathcart, Mark (Mr.) Contributor address; City; State; Zip Code 605 W Johanna St. Austin, TX 78704	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Dell Inc.	
Date 05/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chimenti, Danette (Ms.) Contributor address; City; State; Zip Code 200 The Circle Austin, TX 78704	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Computer Consultant		Employer (See Instructions) Self-Employed	
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Christianson, James (Mr.) Contributor address; City; State; Zip Code 1520 Windsor Rd. Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 06/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Clark, Colin (Mr.) Contributor address; City; State; Zip Code 302 W Johanna Austin, TX 78704	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Homemaker		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: 8/51 Report: 10/76

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00005000

4 Date **5** Full name of contributor out-of-state PAC (ID# _____)
06/28/2014 Clinton, Ryan (Mr.)

6 Contributor address; City; State; Zip Code
8509 Adirondack Cove
Austin, TX 78759

7 Amount of contribution (\$) **8** In-kind contribution description (if applicable)

\$100.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
06/28/2014 Coats, Mark (Mr.)

Contributor address; City; State; Zip Code
10601 Parkfield
Austin, TX 78758

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

\$26.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
06/30/2014 Coldwell, Matt (Mr.)

Contributor address; City; State; Zip Code
710 W Gibson
Austin, TX 78704

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

\$101.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
06/30/2014 Craig, Ken (Mr.)

Contributor address; City; State; Zip Code
913 B Sirocco Dr.
Austin, TX 78745

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

\$50.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
06/03/2014 Crossley, Cecilia (Ms.)

Contributor address; City; State; Zip Code
3100 Catalina Dr.
Austin, TX 78741

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

\$25.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 9/51 Report: 11/76	
2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 06/30/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Crow, Lindsey (Ms.) 6 Contributor address; City; State; Zip Code 3018 West Avenue Austin, TX 78705	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) Nurse		10 Employer (See Instructions) Seton	
Date 06/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Curry, Michael (Mr.) Contributor address; City; State; Zip Code 211 E 7th St Suite 920 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 06/29/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Curry, Michael (Mr.) Contributor address; City; State; Zip Code 700 Lavaca Suite 1400 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 06/29/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Daniel, Harold (Mr.) Contributor address; City; State; Zip Code 3203 Cupid Dr. 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) Client Support Engineer		Employer (See Instructions) Academic Works	
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Davis, Dick (Mr.) Contributor address; City; State; Zip Code 2609 Sherwood Ln Austin, TX 78704	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)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 10/51 Report: 12/76	
2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 06/29/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dawes, Janet (Ms.) 6 Contributor address; City; State; Zip Code 7013 Priscilla Dr. Austin, TX 78752	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 06/29/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Deaderick, Suzanne (Ms.) Contributor address; City; State; Zip Code 2502 Harris Blvd. 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 06/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) deYoung, Claire (Ms.) Contributor address; City; State; Zip Code 4612 Red River Austin, TX 78751	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 06/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dittmar, Ronald (Mr.) Contributor address; City; State; Zip Code 904 Ebony Austin, TX 78704	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 06/29/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dolis, George (Mr.) Contributor address; City; State; Zip Code 704 W Gibson Austin, TX 78704	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: 11/51 Report: 13/76	
2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 06/20/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Downer, Jane (Ms.) 6 Contributor address; City; State; Zip Code 517 East Mary Austin, TX 78704	7 Amount of contribution (\$) \$150.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 06/30/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Duncan, James (Mr.) 6 Contributor address; City; State; Zip Code 11405 Pradera Dr Austin, TX 78759	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) City Planner		10 Employer (See Instructions) Duncan Associates	
4 Date 06/30/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Duncan, Katy (Ms.) 6 Contributor address; City; State; Zip Code 11405 Pradera Dr Austin, TX 78759	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Homemaker		10 Employer (See Instructions) N/A	
4 Date 06/19/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Easterday, Sammy (Ms.) 6 Contributor address; City; State; Zip Code 1702 Shelbourne Dr Austin, TX 78752	7 Amount of contribution (\$) \$5.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 06/04/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ellison, Christopher (Mr.) 6 Contributor address; City; State; Zip Code 2500 Flora Cove Austin, TX 78746	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Professor		10 Employer (See Instructions) UT San Antonio	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 12/51 Report: 14/76	
2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 06/30/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Enochs, Linda (Ms.) 6 Contributor address; City; State; Zip Code 5308 Raincreek Pkwy Austin, TX 78759	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Retired		10 Employer (See Instructions) N/A	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fantl, Nina (Ms.) Contributor address; City; State; Zip Code 601 S. 3rd Austin, TX 78704	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 06/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ferguson, Frances (Ms.) Contributor address; City; State; Zip Code 1013 Harwood Place Austin, TX 78704	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 06/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ferrell, Marjorie (Ms.) Contributor address; City; State; Zip Code 6407 Emerald St Austin, TX 78745	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 06/29/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fivecoat, Sandra (Ms.) Contributor address; City; State; Zip Code 2324 Tom Miller Street Austin, TX 78723	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 13/51 Report: 15/76

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00005000

4 Date 06/29/2014
5 Full name of contributor out-of-state PAC (ID# _____)
Fivecoat, William (Mr.)

6 Contributor address; City; State; Zip Code
2324 Tom Miller Street
Austin, TX 78723

7 Amount of contribution (\$) | **8 In-kind contribution description (if applicable)**
\$50.00 |

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date 06/30/2014
Full name of contributor out-of-state PAC (ID# _____)
Flores, Maria (Ms.)

Contributor address; City; State; Zip Code
1300 Alta Vista
Austin, TX 78704

Amount of contribution (\$) | **In-kind contribution description (if applicable)**
\$150.00 |

(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# _____)
Fraser, Russell (Mr.)

Contributor address; City; State; Zip Code
507 Lockhart Dr
Austin, TX 78704

Amount of contribution (\$) | **In-kind contribution description (if applicable)**
\$50.00 |

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 06/29/2014
Full name of contributor out-of-state PAC (ID# _____)
Fraser, Russell (Mr.)

Contributor address; City; State; Zip Code
507 Lockhart Dr
Austin, TX 78704

Amount of contribution (\$) | **In-kind contribution description (if applicable)**
\$50.00 |

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 06/06/2014
Full name of contributor out-of-state PAC (ID# _____)
Fraser, Sally (Mrs.)

Contributor address; City; State; Zip Code
507 Lockhart Dr
Austin, TX 78704

Amount of contribution (\$) | **In-kind contribution description (if applicable)**
\$50.00 |

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 15/51 Report: 17/76

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00005000

4 Date
06/03/2014

5 Full name of contributor out-of-state PAC (ID# _____)
Gill, Ramanjeet (Mr.)

7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
4308 Bellvue Ave
Austin, TX 78756

\$50.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date
06/30/2014

Full name of contributor out-of-state PAC (ID# _____)
Girard, Denise (Ms.)

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

Contributor address; City; State; Zip Code
4520 Red River St
Austin, TX 78751

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
06/12/2014

Full name of contributor out-of-state PAC (ID# _____)
Goff, Gayle (Ms.)

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

Contributor address; City; State; Zip Code
1106 Upland Dr
Austin, TX 78741

\$350.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Bookkeeper

Employer (See Instructions)
Self

Date
06/28/2014

Full name of contributor out-of-state PAC (ID# _____)
Gourd, Stuart (Mr.)

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

Contributor address; City; State; Zip Code
2204 Greenwood Ave.
Austin, TX 78723

\$50.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
05/24/2014

Full name of contributor out-of-state PAC (ID# _____)
Graham, Ann (Ms.)

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

Contributor address; City; State; Zip Code
3815 Ave H
Austin, TX 78751

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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

1 PAGE #

Schedule: 16/51 Report: 18/76

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/18/2014

5 Full name of contributor out-of-state PAC (ID# _____)
Graham-Moore, Brian (Mr.)

6 Contributor address; City; State; Zip Code
1817 East 40th St
Austin, TX 78722

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

05/26/2014

Full name of contributor out-of-state PAC (ID# _____)
Greenberg, Alan (Mr.)

Contributor address; City; State; Zip Code
5400 Woodview Ave
Austin, TX 78756

Amount of contribution (\$)

\$50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/19/2014

Full name of contributor out-of-state PAC (ID# _____)
Greenberg, Betsy (Ms.)

Contributor address; City; State; Zip Code
3009 Washington Sq.
Austin, TX 78705

Amount of contribution (\$)

\$150.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/30/2014

Full name of contributor out-of-state PAC (ID# _____)
Gregory, Bob (Mr.)

Contributor address; City; State; Zip Code
2939 Westlake Cove
Austin, TX 78746

Amount of contribution (\$)

\$350.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Solid Waste and Recyclables

Employer (See Instructions)
Texas Disposal Systems

Date

06/30/2014

Full name of contributor out-of-state PAC (ID# _____)
Gregory, Kay (Mrs.)

Contributor address; City; State; Zip Code
2939 Westlake Cove
Austin, TX 78746

Amount of contribution (\$)

\$350.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Homemaker

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: 17/51 Report: 19/76

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/26/2014

5 Full name of contributor out-of-state PAC (ID# _____)
Griffin, Teresa (Ms.)

6 Contributor address; City; State; Zip Code
1111 Woodland Ave
Austin, TX 78704

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

06/13/2014

Full name of contributor out-of-state PAC (ID# _____)
Guerrero, Linda (Ms.)

Contributor address; City; State; Zip Code
3204 Fairfax Walk
Austin, TX 78705

Amount of contribution (\$)

\$50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/03/2014

Full name of contributor out-of-state PAC (ID# _____)
Hadden, Karen (Ms.)

Contributor address; City; State; Zip Code
605 Carismatic Ln
Austin, TX 78748

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

06/29/2014

Full name of contributor out-of-state PAC (ID# _____)
Halley, Shannon (Ms.)

Contributor address; City; State; Zip Code
3403 Winfield Dr.
Austin, TX 78704

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/21/2014

Full name of contributor out-of-state PAC (ID# _____)
Hanlon, Ellie (Ms.)

Contributor address; City; State; Zip Code
4801 Caswell Ave
Austin, TX 78751

Amount of contribution (\$)

\$50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 18/51 Report: 20/76

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/30/2014

5 Full name of contributor out-of-state PAC (ID# _____)
Harbeson, Bill (Mr.)

6 Contributor address; City; State; Zip Code
205 The Circle
Austin, TX 78704

7 Amount of contribution (\$)

\$100.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID# _____)
Harden, Joi (Ms.)

06/30/2014

Contributor address; City; State; Zip Code
10507 Cooper Hill Dr.
Austin, TX 78758

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID# _____)
Harris, August (Mr.)

06/30/2014

Contributor address; City; State; Zip Code
1901 West 35th St
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)

Date

Full name of contributor out-of-state PAC (ID# _____)
Harris, Elizabeth (Ms.)

06/30/2014

Contributor address; City; State; Zip Code
4100 Jackson Ave. #314
Austin, TX 78731

Amount of contribution (\$)

\$25.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID# _____)
Harris, Lisa (Ms.)

06/03/2014

Contributor address; City; State; Zip Code
4522 Avenue F
Austin, TX 78751

Amount of contribution (\$)

\$300.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Title Examiner

Employer (See Instructions)
Gracy Title

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 19/51 Report: 21/76	
2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 06/30/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Heinen, Anne (Ms.) 6 Contributor address; City; State; Zip Code 3010 Washington Sq. Austin, TX 78705	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions)			
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Heinen, Dirk (Mr.) Contributor address; City; State; Zip Code 3010 Washington Sq. Austin, TX 78705	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Heinzen, Dan (Mr.) Contributor address; City; State; Zip Code 3007 West Ave Austin, TX 78705	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Physics Professor		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) University of Texas at Austin			
Date 06/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hendler, Scott (Mr.) Contributor address; City; State; Zip Code 1300 Alta Vista Austin, TX 78704	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) HendlerLaw			
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Holland, Leon (Mr.) Contributor address; City; State; Zip Code 10705 Leafwood Ln Austin, TX 78750	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 20/51 Report: 22/76	
2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 06/29/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) House, Kathleen (Ms.) 6 Contributor address; City; State; Zip Code 1503 Inglewood Austin, TX 78741	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 05/15/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hurt, Jan (Mrs.) Contributor address; City; State; Zip Code P.O. Box 1927 Abingdon, VA 24212	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) Artist		Employer (See Instructions) Self-Employed	
Date 06/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hurt, John (Mr.) Contributor address; City; State; Zip Code 4510 Avenue F Austin, TX 78751	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) Store Owner		Employer (See Instructions) Accentric	
Date 06/29/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hurt, Jun (Mrs.) Contributor address; City; State; Zip Code 1209 Newning Austin, TX 78704	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) Administrative Associate		Employer (See Instructions) University of Texas at Austin	
Date 05/15/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hurt, Sam F. (Mr.) Contributor address; City; State; Zip Code P.O. Box 1927 Abingdon, VA 24212	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-Employed	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 21/51 Report: 23/76	
2 FILER NAME Tovo, Kathryn (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 06/29/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hurt, Tom (Mr.) 6 Contributor address; City; State; Zip Code 809 W 32nd Austin, TX 78705	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Architect		10 Employer (See Instructions) Self-Employed	
Date 06/28/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hurt III, Sam (Mr.) Contributor address; City; State; Zip Code 1209 Newning Austin, TX 78704	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self-Employed	
Date 06/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Iverson, Nancy (Mrs.) Contributor address; City; State; Zip Code 506 West 34th Austin, TX 78705	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 06/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Iverson, Richard (Mr.) Contributor address; City; State; Zip Code 506 West 34th Austin, TX 78705	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 06/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jack, Jeff (Mr.) Contributor address; City; State; Zip Code 2008 B Rabb Glen Austin, TX 78704	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Self-Employed	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 22/51 Report: 24/76

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00005000

4 Date
06/26/2014

5 Full name of contributor out-of-state PAC (ID# _____)
Jastram, Laine (Ms.)

6 Contributor address; City; State; Zip Code
5501A Balcones Dr.
Austin, TX 78731

7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable)

\$150.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date
06/30/2014

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

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

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

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
06/17/2014

Full name of contributor out-of-state PAC (ID# _____)
Jimenez, Kislá (Ms.)

Contributor address; City; State; Zip Code
3012 West Ave.
Austin, TX 78705

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

\$125.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
06/03/2014

Full name of contributor out-of-state PAC (ID# _____)
Johnson, D'Ann (Ms.)

Contributor address; City; State; Zip Code
1604 East 11th St
Austin, TX 78702

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

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
06/03/2014

Full name of contributor out-of-state PAC (ID# _____)
Johnson, Shirley (Ms.)

Contributor address; City; State; Zip Code
2000 Woodward St
#421
Austin, TX 78741

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

\$15.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 23/51 Report: 25/76	
2 FILER NAME Tovo, Kathryn (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 06/03/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Justice, David (Mr.) 6 Contributor address; City; State; Zip Code 2408 Tom Miller St Austin, TX 78723	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions)			
Date 06/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Justice, Shirlene (Mrs.) Contributor address; City; State; Zip Code 2408 Tom Miller St Austin, TX 78723	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date 06/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kallendorf Speer, Carol (Ms.) Contributor address; City; State; Zip Code 1704 Briar St Austin, TX 78704	Amount of contribution (\$) \$75.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date 06/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Keil, Philip (Mr.) Contributor address; City; State; Zip Code 912 Christopher Street Austin, TX 78704	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Architect		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) Furman & Keil Architects			
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kennedy, Sara (Ms.) Contributor address; City; State; Zip Code 4105 Avenue B Austin, TX 78751	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
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: 24/51 Report: 26/76	
2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 06/03/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Keohane, Cynthia (Ms.) <hr/> 6 Contributor address; City; State; Zip Code 5702 Wynona Ave Austin, TX 78756	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 06/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) King, Bryan (Mr.) <hr/> Contributor address; City; State; Zip Code 1809 Lightsey Rd. Austin, TX 78704	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) Broadcasting		Employer (See Instructions) Self-Employed	
Date 06/27/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) King, Bryan (Mr.) <hr/> Contributor address; City; State; Zip Code 1809 Lightsey Rd. Austin, TX 78704	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) Broadcasting		Employer (See Instructions) Self-Employed	
Date 06/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) King, David (Mr.) <hr/> Contributor address; City; State; Zip Code 1808 Kerr St Austin, TX 78704	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 06/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) King, John (Mr.) <hr/> Contributor address; City; State; Zip Code 4205 Ramsey Ave Austin, TX 78756	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)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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

1 PAGE #

Schedule: 25/51 Report: 27/76

2 FILER NAME Tovo, Kathryn (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/30/2014

5 Full name of contributor out-of-state PAC (ID# _____)
Kiolbassa, Jolene (Ms.)

6 Contributor address; City; State; Zip Code
3007 West Ave.
Austin, TX 78705

7 Amount of contribution (\$)

\$350.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)
Research/Consultant

10 Employer (See Instructions)
Self-Employed

Date

06/30/2014

Full name of contributor out-of-state PAC (ID# _____)
Kirk, David (Mr.)

Contributor address; City; State; Zip Code
1503 Westover Rd
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)

Date

05/28/2014

Full name of contributor out-of-state PAC (ID# _____)
Kirk, Sandra (Ms.)

Contributor address; City; State; Zip Code
2117 Clifton St.
Austin, TX 78704

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

06/28/2014

Full name of contributor out-of-state PAC (ID# _____)
Kuykendall, Chris (Mr.)

Contributor address; City; State; Zip Code
4100 Avenue C, No 103
Austin, TX 78751

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

06/02/2014

Full name of contributor out-of-state PAC (ID# _____)
Laborers' International Union of North America Local 753 PAC

Contributor address; City; State; Zip Code
5555 North Lamar
Suite E121
Austin, TX 78751

Amount of contribution (\$)

\$350.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 26/51 Report: 28/76	
2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 06/12/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Land, Linda (Ms.) 6 Contributor address; City; State; Zip Code 1106 Upland Austin, TX 78741	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Bookkeeper		10 Employer (See Instructions) Self-Employed	
4 Date 06/30/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Langley, Karen (Ms.) 6 Contributor address; City; State; Zip Code 12349 Metric Blvd Apt 1612 Austin, TX 78758	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 06/03/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lawrence, Daniel (Mr.) 6 Contributor address; City; State; Zip Code 11900 Stonehollow Dr #1412 Austin, TX 78758	7 Amount of contribution (\$) \$40.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 06/30/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lee, Carol (Ms.) 6 Contributor address; City; State; Zip Code 3506 Far View Dr. Austin, TX 78730	7 Amount of contribution (\$) \$110.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 06/30/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lewis, Kevin (Mr.) 6 Contributor address; City; State; Zip Code 1002 Bouldin Ave. Austin, TX 78704	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 27/51 Report: 29/76	
2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 06/03/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ley, Bill (Mr.) 6 Contributor address; City; State; Zip Code 404 West Monroe Austin, TX 78704	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Realtor/Lawyer		10 Employer (See Instructions) Black Sheep Realty	
Date 06/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ley, Mary (Mrs.) Contributor address; City; State; Zip Code 404 West Monroe Austin, TX 78704	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 06/27/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ley, Mary (Mrs.) Contributor address; City; State; Zip Code 404 West Monroe Austin, TX 78704	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 06/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Limon, John (Mr.) Contributor address; City; State; Zip Code 908 Calle Limon Austin, TX 78702	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
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# _____) Linder, Nelson (Mr.) Contributor address; City; State; Zip Code 1807 Rhodes Rd Apt 2 Austin, TX 78721	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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SCHEDULE A

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2 FILER NAME Tovo, Kathryn (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 06/30/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lipchak, Oscar (Mr.) 6 Contributor address; City; State; Zip Code 2511 Del Curto Rd. Austin, TX 78704	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Physician		10 Employer (See Instructions) Self-Employed	
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Long, Sharon (Ms.) Contributor address; City; State; Zip Code 205 Park Ln Austin, TX 78704	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Physician		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Officer/Director		Employer (See Instructions) CLW Inc.	
Date 06/28/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lowe, Claudette (Ms.) Contributor address; City; State; Zip Code 400 Academy Dr. Austin, TX 78704	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Officer/Director		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) General Counsel		Employer (See Instructions) CLW Inc.	
Date 06/29/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lowry, Janice (Ms.) Contributor address; City; State; Zip Code 1710 Alameda Dr. Austin, TX 78704	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(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: 29/51 Report: 31/76	
2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 06/03/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lupa, Paul (Mr.) 6 Contributor address; City; State; Zip Code 903 W 31st Austin, TX 78705	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# _____) MacNeilage, Linda (Mrs.) Contributor address; City; State; Zip Code 606 Harthan St 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 06/28/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) MacNeilage, Peter (Mr.) Contributor address; City; State; Zip Code 606 Harthan St 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 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martin, Carol (Mrs.) Contributor address; City; State; Zip Code 1901 Travis Heights Blvd Austin, TX 78704	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 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martinez, Melanie (Ms.) Contributor address; City; State; Zip Code 1214 Newning Ave. Austin, TX 78704	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)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 30/51 Report: 32/76	
2 FILER NAME Tovo, Kathryn (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 06/03/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martinez, Narda (Ms.) 6 Contributor address; City; State; Zip Code 4510 Avenue F Austin, TX 78751	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Store Owner		10 Employer (See Instructions) Avenue Gallery	
Date 06/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mather, Jean (Ms.) Contributor address; City; State; Zip Code 1611 Alameda Dr. Austin, TX 78704	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 06/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Matthis, David (Mr.) Contributor address; City; State; Zip Code 4308 Avenue F Austin, TX 78751	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Maxwell, Mary Gay (Ms.) Contributor address; City; State; Zip Code 111 Laurel Ln Austin, TX 78705	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
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# _____) McCann, Jana (Ms.) Contributor address; City; State; Zip Code 4000 Pinckney St Austin, TX 78723	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
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: 31/51 Report: 33/76	
2 FILER NAME Tovo, Kathryn (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 05/27/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McCarver, Bo (Mr.) 6 Contributor address; City; State; Zip Code 1719 Manor Rd Austin, TX 78722	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Social Anthropologist		10 Employer (See Instructions) Self-Employed	
Date 06/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McCormick, Donna Beth (Ms.) Contributor address; City; State; Zip Code 5703 Shoalwood Ave. Austin, TX 78756	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
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# _____) McDaniel, Marc (Mr.) Contributor address; City; State; Zip Code 811 W 31st Austin, TX 78705	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Air Pollution Chemist		Employer (See Instructions) Self-Employed	
Date 06/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McGraw, Karen (Ms.) Contributor address; City; State; Zip Code 4315 Avenue C Austin, TX 78751	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
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# _____) Meadows, Donna (Ms.) Contributor address; City; State; Zip Code 631 Amesbury Ln. Austin, TX 78752	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
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: 32/51 Report: 34/76	
2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 06/03/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Meisenbach, Albert (Mr.) <hr/> 6 Contributor address; City; State; Zip Code 1800 San Gabriel St. Austin, TX 78701	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 06/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Meisenbach, Megan (Mrs.) <hr/> Contributor address; City; State; Zip Code 1800 San Gabriel St. 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) Musician		Employer (See Instructions) Self-Employed	
Date 06/14/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Middleton, James (Mr.) <hr/> Contributor address; City; State; Zip Code 908 W Monroe Austin, TX 78704	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 06/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Miller, Stacy (Ms.) <hr/> Contributor address; City; State; Zip Code 912 Christopher Austin, TX 78704	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) Administrator		Employer (See Instructions) University of Texas Austin	
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mishra, Mandy (Ms.) <hr/> Contributor address; City; State; Zip Code 3200 West Avenue Austin, TX 78705	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) Advanced Practice Nurse		Employer (See Instructions) Austin Regional Clinic	

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 33/51 Report: 35/76	
2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 06/06/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mitchell, Sybil (Ms.) 6 Contributor address; City; State; Zip Code 2105 Pat Booker Rd Universal City, TX 78148	7 Amount of contribution (\$) \$150.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 06/30/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moore, Catherine (Ms.) 6 Contributor address; City; State; Zip Code 3802 Avenue H Austin, TX 78751	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Retired		10 Employer (See Instructions) N/A	
4 Date 06/30/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moore, John Paul (Mr.) 6 Contributor address; City; State; Zip Code 3802 Avenue H Austin, TX 78751	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Retired		10 Employer (See Instructions) N/A	
4 Date 06/17/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moriarty, William (Mr.) 6 Contributor address; City; State; Zip Code 1004 Jousting Place Austin, TX 78746	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Vice President/Environmental Engineer		10 Employer (See Instructions) King Engineering	
4 Date 06/15/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morrison, Phil (Mr.) 6 Contributor address; City; State; Zip Code 610 Baylor St Austin, TX 78703	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Professor		10 Employer (See Instructions) University of Texas	

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SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 34/51 Report: 36/76

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00005000

4 Date **5** Full name of contributor out-of-state PAC (ID# _____)
06/03/2014 Morrison, Susan (Ms.)

6 Contributor address; City; State; Zip Code
4205 Ramsey Avenue
Austin, TX 78756

7 Amount of contribution (\$) **8** In-kind contribution description (if applicable)
\$50.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
06/27/2014 Morrow, Donna (Ms.)

Contributor address; City; State; Zip Code
504 Terrace Dr.
Austin, TX 78704

Amount of contribution (\$) In-kind contribution description (if applicable)
\$25.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
06/30/2014 Nazor, Craig (Mr.)

Contributor address; City; State; Zip Code
11701 Barchetta Dr
Austin, TX 78758

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

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
06/27/2014 Newsom, Len (Mr.)

Contributor address; City; State; Zip Code
1503 Chelsea Ln
Austin, TX 78704

Amount of contribution (\$) In-kind contribution description (if applicable)
\$50.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
06/27/2014 Newsom, Sara (Mrs.)

Contributor address; City; State; Zip Code
1503 Chelsea Ln
Austin, TX 78704

Amount of contribution (\$) In-kind contribution description (if applicable)
\$50.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 06/03/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Oliver, Bill (Mr.) 6 Contributor address; City; State; Zip Code 2728 S. Congress #12 Austin, TX 78704	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 06/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Owens, Phyllis (Ms.) Contributor address; City; State; Zip Code 1709 Saint Albans Blvd Austin, TX 78745	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 06/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Palaima, Carolyn (Ms.) Contributor address; City; State; Zip Code 505 E. 40th St Austin, TX 78751	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 06/29/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Penn, Beverly (Ms.) Contributor address; City; State; Zip Code 811 W 31st St Austin, TX 78705	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) Professor		Employer (See Instructions) Texas State University	
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Perkins, Jerry (Mr.) Contributor address; City; State; Zip Code 4128 Lawless St. Austin, TX 78723	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: 36/51 Report: 38/76	
2 FILER NAME Tovo, Kathryn (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 05/27/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pinnelli, Janis (Mrs.) 6 Contributor address; City; State; Zip Code 2001 Exposition Austin, TX 78703	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Accountant		10 Employer (See Instructions) J. Pinnelli Company, LLC	
Date 05/27/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pinnelli, Joseph (Mr.) Contributor address; City; State; Zip Code 2001 Exposition Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) General Contractor		Employer (See Instructions) J. Pinnelli Company, LLC	
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pohlman, Joyce (Ms.) Contributor address; City; State; Zip Code 611 Fletcher St. Austin, TX 78704	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
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# _____) Powell, Greg (Mr.) Contributor address; City; State; Zip Code 1300 Abbey Rd Round Rock, TX 78681	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
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# _____) Radjef, Eric (Mr.) Contributor address; City; State; Zip Code 2311 S. 2nd St Austin, TX 78704	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Geologist		Employer (See Instructions) Statoil	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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

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2 FILER NAME Tovo, Kathryn (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/30/2014

5 Full name of contributor out-of-state PAC (ID# _____)
Ratliff, Gay (Ms.)

6 Contributor address; City; State; Zip Code
3509 Hampton Rd.
Austin, TX 78705

7 Amount of contribution (\$)

\$350.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)
Interior Design

10 Employer (See Instructions)
Gay Ratliff Interiors

Date

06/30/2014

Full name of contributor out-of-state PAC (ID# _____)
Renaud, Lynn (Ms.)

Contributor address; City; State; Zip Code
1708 Exposition Blvd
Austin, TX 78703

Amount of contribution (\$)

\$50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/29/2014

Full name of contributor out-of-state PAC (ID# _____)
Reynolds, Caroline (Mrs.)

Contributor address; City; State; Zip Code
2611 W 49th St
Austin, TX 78731

Amount of contribution (\$)

\$350.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Engineer

Employer (See Instructions)
CR Solutions

Date

06/29/2014

Full name of contributor out-of-state PAC (ID# _____)
Reynolds, Joseph (Mr.)

Contributor address; City; State; Zip Code
2611 W 49th St
Austin, TX 78731

Amount of contribution (\$)

\$350.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
N/A

Date

06/17/2014

Full name of contributor out-of-state PAC (ID# _____)
Rice, Kathleen (Ms.)

Contributor address; City; State; Zip Code
14109 Marks Place
Fort Worth, TX 76116

Amount of contribution (\$)

\$15.00

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 #
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2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00005000

4 Date **5** Full name of contributor out-of-state PAC (ID# _____)
06/25/2014 Rips, Geoff (Mr.)

6 Contributor address; City; State; Zip Code
1311 Ardenwood Rd
Austin, TX 78722

7 Amount of contribution (\$) **8** In-kind contribution description (if applicable)
\$25.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
06/29/2014 Robinson, Tom (Mr.)

Contributor address; City; State; Zip Code
1710 Alameda Dr.
Austin, TX 78704

Amount of contribution (\$) In-kind contribution description (if applicable)
\$25.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
06/29/2014 Rockwell, Brad (Mr.)

Contributor address; City; State; Zip Code
1910 Edgeware Dr
Austin, TX 78704

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

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
06/30/2014 Rodenko, Susan (Ms.)

Contributor address; City; State; Zip Code
8100 Dunblane Dr.
Midland, TX 79707

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

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
06/26/2014 Rodgers, Brian (Mr.)

Contributor address; City; State; Zip Code
1112 W 9th
Austin, TX 78703

Amount of contribution (\$) In-kind contribution description (if applicable)
\$350.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Real Estate Investor

Employer (See Instructions)
Rodgers & Reichle, Inc.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 39/51 Report: 41/76	
2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 06/27/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rodgers, James (Mr.) 6 Contributor address; City; State; Zip Code 1610 Alta Vista Austin, TX 78704	7 Amount of contribution (\$) \$125.00	8 In-kind contribution description (if applicable)
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# _____) Rodgers, Julie (Mrs.) Contributor address; City; State; Zip Code 1610 Alta Vista Austin, TX 78704	Amount of contribution (\$) \$125.00	In-kind contribution description (if applicable)
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# _____) Rohlich, Mary (Ms.) Contributor address; City; State; Zip Code 2101 Pecos St Austin, TX 78703	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Romanczak, Marlene (Ms.) Contributor address; City; State; Zip Code 11 Niles Rd. Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) N/A	
Date 06/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Russell, Tom (Mr.) Contributor address; City; State; Zip Code 1610 Little Raven St Denver, CO 80202	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
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: 40/51 Report: 42/76	
2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 06/03/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Saadeh, Karen (Ms.) 6 Contributor address; City; State; Zip Code 4308 Avenue F Austin, TX 78751	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
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# _____) Sanchez, Charles (Mr.) Contributor address; City; State; Zip Code 2608 West 49th Street Austin, TX 78731	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/04/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sandomirsky, Sharon (Ms.) Contributor address; City; State; Zip Code 2500 Flora Cove Austin, TX 78746	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sanger, Mary (Ms.) Contributor address; City; State; Zip Code 704 Carolyn Ave. Austin, TX 78705	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
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# _____) Satija, Ranjan (Mr.) Contributor address; City; State; Zip Code 1316 Madison Avenue Austin, TX 78757	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 06/30/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Scallon, Susan (Ms.) 6 Contributor address; City; State; Zip Code 13504 Overland Pass Bee Cave, TX 78738	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Schiebel, Cynthia (Ms.) Contributor address; City; State; Zip Code 2313 S. 2nd Austin, TX 78704	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Scott, Barbara (Ms.) Contributor address; City; State; Zip Code 6705 Hillcroft Dr. Austin, TX 78724	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Seeger, Mark (Mr.) Contributor address; City; State; Zip Code 805 W. 16th St Austin, TX 78701	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) National Sales Branch Manager		Employer (See Instructions) Sprint	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 06/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Seeger, Patricia (Ms.) Contributor address; City; State; Zip Code 6705 Winterberry Dr. Austin, TX 78750	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

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SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 42/51 Report: 44/76	
2 FILER NAME Tovo, Kathryn (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 06/19/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Seidel, Diana (Ms.) 6 Contributor address; City; State; Zip Code 709 Fletcher St Austin, TX 78704	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 06/29/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shapiro, David (Mr.) Contributor address; City; State; Zip Code 2422 Western Trails Blvd #126 Austin, TX 78745	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Silberman, Susan (Ms.) Contributor address; City; State; Zip Code 8808 Taylor Rd. Austin, TX 78733	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Psychologist		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Self-Employed	
Date 06/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sittler, Wolf (Mr.) Contributor address; City; State; Zip Code 1403 Kenwood Ave Austin, TX 78704	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(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# _____) Soliz III, Florencio (Mr.) Contributor address; City; State; Zip Code 315 Appleton Court Buda, TX 78610	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(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

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2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/30/2014

5 Full name of contributor out-of-state PAC (ID# _____)
Sorenson-Hyatt, Kristie (Ms.)

6 Contributor address; City; State; Zip Code
1804 Eva St
Austin, TX 78704

7 Amount of contribution (\$)

\$250.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)
Real Estate Broker

10 Employer (See Instructions)
Eva Street Properties

Date

06/02/2014

Full name of contributor out-of-state PAC (ID# _____)
Southwest Laborers District Council SWLDC PAC

Contributor address; City; State; Zip Code
11720 East 21st
Suite D
Tulsa, OK 74129

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

06/03/2014

Full name of contributor out-of-state PAC (ID# _____)
Speer, Jack (Mr.)

Contributor address; City; State; Zip Code
1704 Briar St
Austin, TX 78704

Amount of contribution (\$)

\$75.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/28/2014

Full name of contributor out-of-state PAC (ID# _____)
Spitz, Robert (Mr.)

Contributor address; City; State; Zip Code
3211 E. Cesar Chavez
Austin, TX 78702

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)
Veterinarian

Employer (See Instructions)
Lake Austin Blvd. Animal Hospital

Date

06/03/2014

Full name of contributor out-of-state PAC (ID# _____)
Stevens, Jean (Ms.)

Contributor address; City; State; Zip Code
1619 W 14th St
Austin, TX 78703

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)
Retired

Employer (See Instructions)
N/A

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00005000

4 Date **5** Full name of contributor out-of-state PAC (ID# _____)
06/03/2014 Tevis, Terry (Ms.)

7 Amount of contribution (\$) **8** In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
11614 Fast Horse Dr.
Austin, TX 78759

\$100.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
05/28/2014 Texas Democratic Party

Amount of contribution (\$) In-kind contribution description (if applicable)
\$350.00 Voter File Access

Contributor address; City; State; Zip Code
4818 E. Ben White
Suite 104
Austin, TX 78741

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
06/30/2014 Thompson, Dwight (Mr.)

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

Contributor address; City; State; Zip Code
P.O. Box 5734
Austin, TX 78763

\$25.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
06/28/2014 Thomson, Phyllis (Ms.)

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

Contributor address; City; State; Zip Code
608 West Croslin St
Austin, TX 78752

\$60.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
06/03/2014 Timberlake, Walter (Mr.)

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

Contributor address; City; State; Zip Code
2006 Bouldin Ave.
Austin, TX 78704

\$50.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 06/30/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tipps, Lisa (Ms.) 6 Contributor address; City; State; Zip Code P.O. Box 300038 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 06/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Todd, Connie (Ms.) Contributor address; City; State; Zip Code 1403 S. Congress Ave. Austin, TX 78704	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 06/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tollett, Blake (Mr.) Contributor address; City; State; Zip Code 3701 Bonnie Rd 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) Self-Employed	
Date 06/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Trejo, Deborah (Ms.) Contributor address; City; State; Zip Code 1717 Briar St Austin, TX 78704	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) Attorney		Employer (See Instructions) Kemp Smith LLP	
Date 06/29/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tucker, Larry (Mr.) Contributor address; City; State; Zip Code 2210 White Dove Pass Austin, TX 78734	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) LIM Digital	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 06/30/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tucker, Pam (Ms.) 6 Contributor address; City; State; Zip Code 3303 Snead Path Round Rock, TX 78664	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) CEO		10 Employer (See Instructions) Utility Composites	
4 Date 05/27/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Turner, Kay (Ms.) 6 Contributor address; City; State; Zip Code 198 Roebling St Apt 5B Brooklyn, NY 11211	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Retired		10 Employer (See Instructions) N/A	
4 Date 06/30/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tyler, Kathleen (Ms.) 6 Contributor address; City; State; Zip Code 1811 West 38th St Austin, TX 78731	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 06/29/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Volz, Candace (Ms.) 6 Contributor address; City; State; Zip Code 1406 Preston Ave. Austin, TX 78703	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 06/03/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Walton, Charles (Mr.) 6 Contributor address; City; State; Zip Code 1701 Bouldin Ave Austin, TX 78704	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Marketing Communications		10 Employer (See Instructions) Emerson	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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2 FILER NAME Tovo, Kathryn (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/27/2014

5 Full name of contributor out-of-state PAC (ID# _____)
Webre, Michele (Ms.)

6 Contributor address; City; State; Zip Code
511 Lockhart Dr.
Austin, TX 78704

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

06/03/2014

Full name of contributor out-of-state PAC (ID# _____)
Weed, Betty (Ms.)

Contributor address; City; State; Zip Code
2218 Alta Vista Ave.
Austin, TX 78704

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/23/2014

Full name of contributor out-of-state PAC (ID# _____)
Weeks, Joelyn (Ms.)

Contributor address; City; State; Zip Code
6805 Moonmont
Austin, TX 78745

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

06/29/2014

Full name of contributor out-of-state PAC (ID# _____)
Weigand, Ingrid (Ms.)

Contributor address; City; State; Zip Code
704 W Gibson
Austin, TX 78704

Amount of contribution (\$)

\$350.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Retired

N/A

Date

06/03/2014

Full name of contributor out-of-state PAC (ID# _____)
Wendler, Ed (Mr.)

Contributor address; City; State; Zip Code
4803 Balcones Dr.
Austin, TX 78731

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)

Employer (See Instructions)

Real Estate

Self-Employed

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 49/51 Report: 51/76

2 FILER NAME Tovo, Kathryn (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/27/2014

5 Full name of contributor out-of-state PAC (ID# _____)
White, Sage (Ms.)

6 Contributor address; City; State; Zip Code
1904 Kenwood Ave
Austin, TX 78704

7 Amount of contribution (\$)

\$100.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

05/24/2014

Full name of contributor out-of-state PAC (ID# _____)
Whitlow, Elizabeth (Ms.)

Contributor address; City; State; Zip Code
1509 A Parkway
Austin, TX 78703

Amount of contribution (\$)

\$25.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/30/2014

Full name of contributor out-of-state PAC (ID# _____)
Wick, Jim (Mr.)

Contributor address; City; State; Zip Code
2611-D Ektom Dr.
Austin, TX 78745

Amount of contribution (\$)

\$50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/30/2014

Full name of contributor out-of-state PAC (ID# _____)
Wier, Kevin (Mr.)

Contributor address; City; State; Zip Code
8207 Stillwood Ln
Austin, TX 78757

Amount of contribution (\$)

\$150.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/03/2014

Full name of contributor out-of-state PAC (ID# _____)
Wilcox, Cynthia (Ms.)

Contributor address; City; State; Zip Code
6705 West Highway 290
#502 Suite 234
Austin, TX 78735

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: 50/51 Report: 52/76	
2 FILER NAME Tovo, Kathryn (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 06/17/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Williams, Jonathan (Mr.) 6 Contributor address; City; State; Zip Code 3012 West Ave. Austin, TX 78705	7 Amount of contribution (\$) \$125.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 06/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wilson, Jack (Mr.) Contributor address; City; State; Zip Code 4803 Avenue H Austin, TX 78751	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 06/29/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Witte, Tracy (Ms.) Contributor address; City; State; Zip Code 908 E. 14th Street Austin, TX 78702	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 06/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Woods, William (Mr.) Contributor address; City; State; Zip Code 3211 Funston St Austin, TX 78703	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Woods, William (Mr.) Contributor address; City; State; Zip Code 3211 Funston St Austin, TX 78703	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 51/51 Report: 53/76

2 FILER NAME Tovo, Kathryn (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00005000

4 Date 06/30/2014
5 Full name of contributor out-of-state PAC (ID# _____)
Yeatts, Malcolm (Mr.)

6 Contributor address; City; State; Zip Code
4811 Allison Cove
Austin, TX 78741

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 06/30/2014
Full name of contributor out-of-state PAC (ID# _____)
Zaragoza, Nuria (Ms.)

Contributor address; City; State; Zip Code
1908 Cliff St
Austin, TX 78705

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)
Social Worker

Employer (See Instructions)
Self-Employed

Date 06/25/2014
Full name of contributor out-of-state PAC (ID# _____)
Zent, Shelley (Ms.)

Contributor address; City; State; Zip Code
5507 Lemonwood Dr.
Austin, TX 78731

Amount of contribution (\$) \$25.00
In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL 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: 1/13 Report: 55/76		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000	
4 Date 05/27/2014	5 Payee name Breed & Co., Inc.				
6 Amount (\$) \$30.31	7 Payee address City; State; Zip Code 718 West 29th Street Austin, TX 78705				
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 Keys	
	Candidate / Officeholder name			Office sought:	Office held:
Complete ONLY if direct expenditure to benefit C/OH					
Date 06/04/2014	Payee name Butts, David (Mr.)				
Amount (\$) \$800.00	Payee address City; State; Zip Code 1914 Patton Ln Austin, TX 78723				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense			Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political Consulting	
	Candidate / Officeholder name			Office sought:	Office held:
Complete ONLY if direct expenditure to benefit C/OH					
Date 06/23/2014	Payee name Capital Area Democratic Women				
Amount (\$) \$125.00	Payee address City; State; Zip Code P.O. Box 685008 Austin, TX 78768				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee			Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event Sponsorship	
	Candidate / Officeholder name			Office sought:	Office held:
Complete ONLY if direct expenditure to benefit C/OH					
Date 06/16/2014	Payee name Capitol Courier				
Amount (\$) \$13.50	Payee address City; State; Zip Code P.O. Box 3182 Austin, TX 78764				
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"/> Courier Services	
	Candidate / Officeholder name			Office sought:	Office held:
Complete ONLY if direct expenditure to benefit C/OH					

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: 2/13 Report: 56/76		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000	
4 Date 05/30/2014		5 Payee name Clarkie Hall Farmers Inc.			
6 Amount (\$) \$839.28		7 Payee address City; State; Zip Code 5818 Balcones Dr. Austin, TX 78731			
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"/> Campaign Office Insurance	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 06/16/2014		Payee name Costco			
Amount (\$) \$243.75		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) Advertising 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 06/25/2014		Payee name Costco			
Amount (\$) \$205.81		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) Advertising 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 05/30/2014		Payee name CVS/pharmacy			
Amount (\$) \$31.15		Payee address City; State; Zip Code 2301 S. Congress Ave Austin, TX 78704			
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"/> Campaign Office Supplies	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 3/13 Report: 57/76	2 FILER NAME Tovo, Kathrynne (Ms.)	3 ACCOUNT # (TEC filers) 00005000
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4 Date 06/03/2014	5 Payee name David Thomas Photography
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6 Amount (\$) \$200.00	7 Payee address City; State; Zip Code 2004 B East 9th Street Austin, TX 78702
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Photography Services
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/30/2014	Payee name De Los Santos, Drew (Ms.)
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Amount (\$) \$1,250.00	Payee address City; State; Zip Code 2601 Parker Ln Unit A Austin, TX 78701
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary for campaign services
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 06/16/2014	Payee name De Los Santos, Drew (Ms.)
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Amount (\$) \$1,250.00	Payee address City; State; Zip Code 2601 Parker Ln Unit A Austin, TX 78741
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary for campaign services
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 06/16/2014	Payee name De Mayo Cellular
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Amount (\$) \$83.00	Payee address City; State; Zip Code 8716 Research Blvd Ste 220 Austin, TX 78758
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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"/> Campaign Office Cell Phones
-------------------------------	---	--

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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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: 4/13 Report: 58/76		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000	
4 Date 05/23/2014		5 Payee name El Mercado			
6 Amount (\$) \$108.25		7 Payee address City; State; Zip Code 1302 South First Street Austin, TX 78704			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Launch Party - Deposit	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 06/03/2014		Payee name El Mercado			
Amount (\$) \$529.66		Payee address City; State; Zip Code 1302 South First Street Austin, TX 78704			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Launch Party	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 06/02/2014		Payee name Facebook, Inc.			
Amount (\$) \$9.00		Payee address City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political Advertising	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 06/30/2014		Payee name Facebook, Inc.			
Amount (\$) \$11.36		Payee address City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political Advertising	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 5/13 Report: 59/76	2 FILER NAME Tovo, Kathrynne (Ms.)	3 ACCOUNT # (TEC filers) 00005000
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4 Date 05/23/2014	5 Payee name Fagan, Dennis (Mr.)
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6 Amount (\$) \$806.60	7 Payee address City; State; Zip Code 1601 West 38th Street #202 Austin, TX 78731
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Photography Services
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/27/2014	Payee name FedEx Office
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Amount (\$) \$67.15	Payee address City; State; Zip Code 600 E. Ben White Blvd Austin, TX 78704
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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"/> Invitation Printing
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/27/2014	Payee name FedEx Office
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Amount (\$) \$1.74	Payee address City; State; Zip Code 600 E. Ben White Blvd Austin, TX 78704
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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"/> Cutting Services
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/31/2014	Payee name FedEx Office
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Amount (\$) \$20.55	Payee address City; State; Zip Code 600 E. Ben White Blvd Austin, TX 78704
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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"/> Invitation Printing
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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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: 6/13 Report: 60/76		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000	
4 Date 06/20/2014	5 Payee name FedEx Office				
6 Amount (\$) \$1.61	7 Payee address City; State; Zip Code 600 E. Ben White Blvd Austin, TX 78704				
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"/> Cutting services		
	Candidate / Officeholder name		Office sought:	Office held:	
9 Complete ONLY if direct expenditure to benefit C/OH					
Date 06/20/2014	Payee name FedEx Office				
Amount (\$) \$35.88	Payee address City; State; Zip Code 600 E. Ben White Blvd Austin, TX 78704				
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"/> Flyer Printing		
	Candidate / Officeholder name		Office sought:	Office held:	
Complete ONLY if direct expenditure to benefit C/OH					
Date 05/23/2014	Payee name Griffith Descendants, LLC				
Amount (\$) \$5,560.00	Payee address City; State; Zip Code 3536 Bee Caves Rd #310 Austin, TX 78746				
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"/> Campaign Office Deposit and Rent		
	Candidate / Officeholder name		Office sought:	Office held:	
Complete ONLY if direct expenditure to benefit C/OH					
Date 06/03/2014	Payee name Harland Clarke Corporation				
Amount (\$) \$34.75	Payee address City; State; Zip Code 10931 Laureate Drive Austin, TX 78249				
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"/> Campaign check fees		
	Candidate / Officeholder name		Office sought:	Office held:	
Complete ONLY if direct expenditure to benefit C/OH					

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: 7/13 Report: 61/76	2 FILER NAME Tovo, Kathrynne (Ms.)	3 ACCOUNT # (TEC filers) 00005000
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4 Date 05/14/2014	5 Payee name Hughes, William (Mr.)		
6 Amount (\$) \$1,650.00	7 Payee address City; State; Zip Code 1009 Hillside Oaks Dr. Austin, TX 78745		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary for campaign services
	9 Complete ONLY if direct expenditure to benefit C/OH		
Candidate / Officeholder name		Office sought:	Office held:

Date 05/30/2014	Payee name Hughes, William (Mr.)		
Amount (\$) \$1,650.00	Payee address City; State; Zip Code 1009 Hillside Oaks Dr. Austin, TX 78745		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary for campaign services
	Complete ONLY if direct expenditure to benefit C/OH		
Candidate / Officeholder name		Office sought:	Office held:

Date 06/16/2014	Payee name Hughes, William (Mr.)		
Amount (\$) \$1,665.00	Payee address City; State; Zip Code 1009 Hillside Oaks Dr. Austin, TX 78745		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary for campaign services
	Complete ONLY if direct expenditure to benefit C/OH		
Candidate / Officeholder name		Office sought:	Office held:

Date 06/16/2014	Payee name Kelly Graphics		
Amount (\$) \$593.53	Payee address City; State; Zip Code 1409 Quaker Ridge Austin, TX 78746		
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"/> Bumper Stickers
	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: 8/13 Report: 62/76		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000	
4 Date 05/27/2014		5 Payee name Kinney, Nathan (Mr.)			
6 Amount (\$) \$50.00		7 Payee address City; State; Zip Code 1700 Lavaca St Austin, TX 78701			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> PA/Audio Equipment Rental	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought:	Office held:
Date 05/12/2014		Payee name Kiolbassa, Jolene (Ms.)			
Amount (\$) \$995.00		Payee address City; State; Zip Code 3007 West Ave Austin, TX 78705			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor for campaign services	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought:	Office held:
Date 06/16/2014		Payee name Kiolbassa, Jolene (Ms.)			
Amount (\$) \$1,250.00		Payee address City; State; Zip Code 3007 West Ave Austin, TX 78705			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary for campaign services	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought:	Office held:
Date 06/03/2014		Payee name Miscellaneous Rentals			
Amount (\$) \$38.97		Payee address City; State; Zip Code 1901 E 51st Street Bldg 1 Austin, TX 78723			
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"/> Furniture Rental	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought:	Office held:

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 9/13 Report: 63/76		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000	
4 Date 05/25/2014	5 Payee name Net Victories				
6 Amount (\$) \$34.80	7 Payee address City; State; Zip Code 4203 Montrose Blvd Suite 350 Houston, TX 77006				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Automated Marketing		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/28/2014	Payee name Net Victories				
Amount (\$) \$1,333.25	Payee address City; State; Zip Code 4203 Montrose Blvd Suite 350 Houston, TX 77006				
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"/> Website Build		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/31/2014	Payee name Net Victories				
Amount (\$) \$24.00	Payee address City; State; Zip Code 4203 Montrose Blvd Suite 350 Houston, TX 77006				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Automated Marketing		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 06/25/2014	Payee name Net Victories				
Amount (\$) \$58.80	Payee address City; State; Zip Code 4203 Montrose Blvd Suite 350 Houston, TX 77006				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Email Services		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 10/13 Report: 64/76		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000	
4 Date 05/13/2014		5 Payee name Office Max			
6 Amount (\$) \$1.25		7 Payee address City; State; Zip Code 907 West Fifth Street Austin, TX 78703			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Cutting Services	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 05/13/2014		Payee name Office Max			
Amount (\$) \$3.25		Payee address City; State; Zip Code 907 West Fifth Street Austin, TX 78703			
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"/> Flyer Printing	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 06/03/2014		Payee name Office Max			
Amount (\$) \$75.89		Payee address City; State; Zip Code 4615 North Lamar Blvd Austin, TX 78756			
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"/> Campaign Office Supplies	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 06/24/2014		Payee name Office Max			
Amount (\$) \$67.92		Payee address City; State; Zip Code 4615 North Lamar Blvd Austin, TX 78756			
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"/> Campaign Office Supplies	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 11/13 Report: 65/76		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000	
4 Date 06/24/2014		5 Payee name Office Max			
6 Amount (\$) \$19.80		7 Payee address City; State; Zip Code 4615 North Lamar Blvd Austin, TX 78756			
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"/> Campaign Office Supplies	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 06/30/2014		Payee name Piryx, Inc.			
Amount (\$) \$1,137.86		Payee address City; State; Zip Code 144 2nd St. 1st floor San Francisco, CA 94105			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Cumulative donation processing fees for reporting period	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 06/16/2014		Payee name Scholz Garten			
Amount (\$) \$487.13		Payee address City; State; Zip Code 1607 San Jacinto Blvd Austin, TX 78701			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Watch Party Room Reservation	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 05/27/2014		Payee name Texas Democratic Party			
Amount (\$) \$550.00		Payee address City; State; Zip Code 4818 E. Ben White Blvd. Ste. 104 Austin, TX 78741			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> License for online voter file database	
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: 12/13 Report: 66/76		2 FILER NAME Tovo, Kathryn (Ms.)		3 ACCOUNT # (TEC filers) 00005000	
4 Date 06/20/2014		5 Payee name Texas Made Productions			
6 Amount (\$) \$350.00		7 Payee address City; State; Zip Code 3707 Manchaca #177 Austin, TX 78704			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Video Services	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 06/25/2014		Payee name Thompson & Knight LLP			
Amount (\$) \$425.00		Payee address City; State; Zip Code 98 San Jacinto Blvd Ste 1900 Austin, TX 78701			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Legal Services		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Legal fees for campaign	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 06/17/2014		Payee name Thundercloud Subs			
Amount (\$) \$143.47		Payee address City; State; Zip Code 3200 Guadalupe Austin, TX 78705			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Sponsor Lunch for Kirk Watson Campaign Academy	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 05/14/2014		Payee name Travis County Democratic Party			
Amount (\$) \$50.00		Payee address City; State; Zip Code 1311 E 6th St Austin, TX 78702			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Staff Training	
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: 13/13 Report: 67/76	2 FILER NAME Tovo, Kathryn (Ms.)	3 ACCOUNT # (TEC filers) 00005000
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4 Date 06/20/2014	5 Payee name Walmart
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6 Amount (\$) \$45.84	7 Payee address City; State; Zip Code 710 Ben White Blvd Austin, TX 78704
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Candy for Juneteenth Parade
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 06/16/2014	Payee name Worley Printing Co, Inc.
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Amount (\$) \$226.25	Payee address City; State; Zip Code 3217 North IH 35 Austin, TX 78722
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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"/> Rally signs, Lapel stickers
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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**POLITICAL EXPENDITURES
MADE FROM PERSONAL FUNDS**

SCHEDULE G

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: 1/9 Report: 68/76		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000
4 Date 04/14/2014	5 Payee name Annie's List			
6 Amount (\$) \$150.00 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address City; State; Zip Code P.O. Box 699 Austin, TX 78767			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event Ticket	
Date 06/18/2014	Payee name Austin Environmental Democrats			
Amount (\$) \$10.00 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 604 W. 11th St. Austin, TX 78701			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Membership Dues	
Date 01/09/2014	Payee name Black Austin Democrats			
Amount (\$) \$500.00 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code P.O. Box 212 Austin, TX 78767			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event Sponsorship	
Date 04/30/2014	Payee name Bruce Elfant for Tax Assessor-Collector			
Amount (\$) \$110.00 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code P.O. Box 49051 Austin, TX 78765			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event Sponsorship	

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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: 2/9 Report: 69/76		2 FILER NAME Tovo, Kathryn (Ms.)		3 ACCOUNT # (TEC filers) 00005000	
4 Date 04/29/2014		5 Payee name Burnt Orange Report			
6 Amount (\$) \$100.00 <input type="checkbox"/> Reimbursement from political contributions intended		7 Payee address City; State; Zip Code 908 E 5th St #114 Austin, TX 78702			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event Sponsorship	
Date 04/30/2014		Payee name Butts, David (Mr.)			
Amount (\$) \$800.00 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code 1914 Patton Ln Austin, TX 78723			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political consulting	
Date 02/03/2014		Payee name Capital Area Asian American Democrats			
Amount (\$) \$50.00 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code P.O. Box 300595 Austin, TX 78703			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event Sponsorship	
Date 06/23/2014		Payee name Capital Area Democratic Women			
Amount (\$) \$125.00 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code P.O. Box 685008 Austin, TX 78768			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event Sponsorship	

**POLITICAL EXPENDITURES
MADE FROM PERSONAL FUNDS**

SCHEDULE G

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: 3/9 Report: 70/76	2 FILER NAME Tovo, Kathrynne (Ms.)	3 ACCOUNT # (TEC filers) 00005000
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4 Date 04/11/2014	5 Payee name Capitol Rubber Stamp
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6 Amount (\$) \$34.10 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address City; State; Zip Code 3314 S. Congress Ave Austin, TX 78704
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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"/> Name Badge
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Date 04/11/2014	Payee name Capitol Rubber Stamp
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Amount (\$) \$22.73 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 3314 S. Congress Ave Austin, TX 78704
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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"/> Name Badge
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Date 02/09/2014	Payee name GoDaddy.com
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Amount (\$) \$112.72 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 14455 N Hayden Rd Suite 219 Scottsdale, AZ 85260
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Domain Renewal
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Date 04/02/2014	Payee name Hughes, William (Mr.)
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Amount (\$) \$1,650.00 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 1009 Hillside Oaks Dr. Austin, TX 78745
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary for campaign services
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**POLITICAL EXPENDITURES
MADE FROM PERSONAL FUNDS**

SCHEDULE G

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: 4/9 Report: 71/76		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000	
4 Date 04/30/2014		5 Payee name Hughes, William (Mr.)			
6 Amount (\$) \$1,650.00 <input type="checkbox"/> Reimbursement from political contributions intended		7 Payee address City; State; Zip Code 1009 Hillside Oaks Dr. Austin, TX 78745			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary for campaign services	
Date 02/24/2014		Payee name Kiolbassa, Jolene (Ms.)			
Amount (\$) \$300.00 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code 3007 West Ave Austin, TX 78705			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor for officeholder research	
Date 03/02/2014		Payee name Kiolbassa, Jolene (Ms.)			
Amount (\$) \$355.00 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code 3007 West Ave Austin, TX 78705			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor for officeholder research	
Date 03/23/2014		Payee name Kiolbassa, Jolene (Ms.)			
Amount (\$) \$310.00 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code 3007 West Ave Austin, TX 78705			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contact Labor for officeholder research	

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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: 5/9 Report: 72/76		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000	
4 Date 04/02/2014	5 Payee name Kiolbassa, Jolene (Ms.)				
6 Amount (\$) \$320.00 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address City; State; Zip Code 3007 West Ave Austin, TX 78705				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor for officeholder research		
Date 04/10/2014	Payee name Kiolbassa, Jolene (Ms.)				
Amount (\$) \$400.00 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 3007 West Ave Austin, TX 78705				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor for campaign services		
Date 04/13/2014	Payee name Kiolbassa, Jolene (Ms.)				
Amount (\$) \$505.00 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 3007 West Ave Austin, TX 78705				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor for campaign services		
Date 04/28/2014	Payee name Kiolbassa, Jolene (Ms.)				
Amount (\$) \$730.50 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 3007 West Ave Austin, TX 78705				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor for campaign services		

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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: 6/9 Report: 73/76		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000	
4 Date 06/25/2014		5 Payee name MacDaddy Service			
6 Amount (\$) \$351.81 <input type="checkbox"/> Reimbursement from political contributions intended		7 Payee address City; State; Zip Code 7004 Chinook Dr Austin, TX 78736			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor for officeholder computer services	
Date 01/17/2014		Payee name Office Max			
Amount (\$) \$55.14 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code 4615 North Lamar Blvd Austin, TX 78756			
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"/> Copy Services	
Date 03/03/2014		Payee name Office Max			
Amount (\$) \$63.33 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code 4615 North Lamar Blvd Austin, TX 78756			
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"/> Copy Services	
Date 02/15/2014		Payee name OfficeMax			
Amount (\$) \$72.69 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code 907 West Fifth St Austin, TX 78703			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Copy Services	

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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: 7/9 Report: 74/76		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000	
4 Date 01/28/2014		5 Payee name Opinion Analysts, Inc			
6 Amount (\$) \$25.00 <input type="checkbox"/> Reimbursement from political contributions intended		7 Payee address City; State; Zip Code 906 Rio Grande St Austin, TX 78701			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> District Information	
Date 02/24/2014		Payee name Thompson & Knight LLP			
Amount (\$) \$340.00 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code 98 San Jacinto Blvd Ste 1900 Austin, TX 78701			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Legal Services		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Legal fees for officeholder matters	
Date 03/10/2014		Payee name Thompson & Knight LLP			
Amount (\$) \$170.00 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code 98 San Jacinto Blvd Ste 1900 Austin, TX 78701			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Legal Services		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Legal fees for officeholder matters	
Date 04/01/2014		Payee name Thompson & Knight LLP			
Amount (\$) \$225.00 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code 98 San Jacinto Blvd Ste 1900 Austin, TX 78701			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Legal Services		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Legal fees for officeholder matters	

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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: 8/9 Report: 75/76		2 FILER NAME Tovo, Kathryn (Ms.)		3 ACCOUNT # (TEC filers) 00005000	
4 Date 05/06/2014		5 Payee name Thompson & Knight LLP			
6 Amount (\$) \$170.00 <input type="checkbox"/> Reimbursement from political contributions intended		7 Payee address City; State; Zip Code 98 San Jacinto Blvd Ste 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"/> Legal fees for Campaign	
Date 06/25/2014		Payee name Thompson & Knight LLP			
Amount (\$) \$127.50 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code 98 San Jacinto Blvd Ste 1900 Austin, TX 78701			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Legal Services		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Legal fees for officeholder matters	
Date 03/25/2014		Payee name Travis County Democratic Party			
Amount (\$) \$120.00 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code 1311 E 6th St Austin, TX 78702			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political Donation	
Date 05/06/2014		Payee name United States Postal Service - Central Park Station			
Amount (\$) \$56.00 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code 3507 North Lamar Blvd Austin, TX 78705			
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"/> Post Office Box rental	

**POLITICAL EXPENDITURES
MADE FROM PERSONAL FUNDS**

SCHEDULE G

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
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Travel Out Of District
Office Overhead/Rental Expense

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 9/9 Report: 76/76	2 FILER NAME Tovo, Kathrynne (Ms.)	3 ACCOUNT # (TEC filers) 00005000
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4 Date 03/17/2014	5 Payee name Wick, Jim (Mr.)
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6 Amount (\$) \$500.00 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address City; State; Zip Code 2611 Ektom Drive Unit D Austin, TX 78745
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political consulting