

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)
00000001

2 PAGE #
1 of 59

**3 CANDIDATE /
OFFICEHOLDER
NAME**

 MS / MRS / MR FIRST MI
Ann
NICKNAME LAST SUFFIX
Kitchen
OFFICE USE ONLY

Date Received

Date Hand-delivered or Date Postmarked

Receipt #

Amount

Date Processed

Date Imaged

**4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS**

 ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE
2401 Briargrove
Austin, TX 78704-2701

☐ Change of Address

**5 CAMPAIGN
TREASURER
NAME**

 MS / MRS / MR FIRST MI
Ken
NICKNAME LAST SUFFIX
Craig

**6 CAMPAIGN
TREASURER
ADDRESS**
(Residence or business)

 STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE
913 B Sirocco Drive
Austin, TX 78745

**7 CAMPAIGN
TREASURER
PHONE**

 AREA CODE PHONE NUMBER EXTENSION
(512) 626-8843
8 REPORT TYPE
☐ January 15 ☒ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (officeholder only)
☐ July 15 ☐ 8th day before election ☐ Exceeded \$500 limit ☐ Final report (Attach C/OH - FR)
**9 PERIOD
COVERED**
 Month Day Year Month Day Year
07/01/2014 THROUGH 09/25/2014
10 ELECTION
 ELECTION DATE
Month Day Year
11/04/2014

ELECTION TYPE

☐ Primary ☐ Runoff ☒ General ☐ Special
11 OFFICE

OFFICE HELD (if any)

12 OFFICE SOUGHT (if known)

Austin City Council District 5

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

13 C/OH NAME Kitchen, Ann

14 ACCOUNT # (Ethics Commission filers)
0000000115 NOTICE
FROM
POLITICAL
COMMITTEE(S)

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

COMMITTEE TYPE

COMMITTEE NAME

☐ GENERAL

COMMITTEE ADDRESS

☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

☐ additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION
TOTALS1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN
PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$

0.00

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

\$

37,270.00

EXPENDITURE
TOTALS

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

\$

0.00

4. TOTAL POLITICAL EXPENDITURES

\$

32,130.82

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

\$

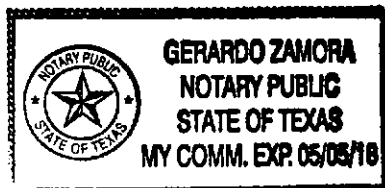
45,424.72

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

\$

38,200.00

17 AFFIDAVIT



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

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Ann Kitchen, this the 6th day
of October, 20 14, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Gerardo Zamora

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: 1/43 Report: 3/59

2 FILER NAME Kitchen, Ann

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

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

Aaker, Linda

07/28/2014

6 Contributor address; City; State; Zip Code

6204 Shadow Mountain Cv
Austin, TX 78731-4110

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)
retired

10 Employer (See Instructions)
retired

Date

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

Adams, Carol and Chris

09/05/2014

Contributor address; City; State; Zip Code

2905 Glenview Ave
Austin, TX 78703-1959

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# _____)

Alsup, Marion

08/14/2014

Contributor address; City; State; Zip Code

2311 Pruett St
Austin, TX 78703-4337

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)
Housewife

Employer (See Instructions)
Self

Date

Full name of contributor ☒ out-of-state PAC (ID# C0001114)

American Federation of State, County & Municipal Employees-
AFL-CIO

09/24/2014

Contributor address; City; State; Zip Code

1625 L St NW
Washington, DC 20036-5665

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

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

Andrus, Jon

08/05/2014

Contributor address; City; State; Zip Code

1611 Northwood Rd
Austin, TX 78703-1945

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)
Austin Retail Partners

Employer (See Instructions)
real estate

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 2/43 Report: 4/59

2 FILER NAME Kitchen, Ann

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date

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

7 Amount of
contribution (\$)

8 In-kind contribution
description (if applicable)

09/23/2014

6 Contributor address; City; State; Zip Code
5909 Down Valley Ct
Austin, TX 78731-3665

\$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# _____)
Armstrong, Beau

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

08/05/2014

Contributor address; City; State; Zip Code
212 Lavaca St
Austin, TX 78701-3955

\$350.00

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

Principal occupation / Job title (See Instructions)
Chairman and CEO

Employer (See Instructions)
Stratus Properties

Date

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

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

08/05/2014

Contributor address; City; State; Zip Code
212 Lavaca St
Austin, TX 78701-3955

\$350.00

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

Principal occupation / Job title (See Instructions)
homemaker

Employer (See Instructions)
homemaker

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Austin Board of Realtors Political Action Committee

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

09/25/2014

Contributor address; City; State; Zip Code
4106 Medical Pkwy
Austin, TX 78756-3722

\$350.00

(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# _____)
Austin Firefighters Association Political Action Committee

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

09/25/2014

Contributor address; City; State; Zip Code
7537 Cameron Rd
Austin, TX 78752-2013

\$350.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 3/43 Report: 5/59

2 FILER NAME Kitchen, Ann

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date
09/25/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Austin Travis County EMS Employee Association

7 Amount of contribution (\$)
\$350.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
5817 Wilcab Rd
Austin, TX 78721-2806

(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# _____)
Ayres, Bob

Amount of contribution (\$)
\$350.00

In-kind contribution description (if applicable)

08/01/2014

Contributor address; City; State; Zip Code
2408 Keating Ln
Austin, TX 78703-2342

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

Principal occupation / Job title (See Instructions)
Land Steward

Employer (See Instructions)
Shield Ranch

Date

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

Amount of contribution (\$)
\$50.00

In-kind contribution description (if applicable)

09/25/2014

Contributor address; City; State; Zip Code
11504 Oakwood Dr
Austin, TX 78753-2729

(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# _____)
Bailey, Debra

Amount of contribution (\$)
\$100.00

In-kind contribution description (if applicable)

08/07/2014

Contributor address; City; State; Zip Code
8500 Andreas Cv
Austin, TX 78759-7926

(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# _____)
Bailey, Rich

Amount of contribution (\$)
\$25.00

In-kind contribution description (if applicable)

09/23/2014

Contributor address; City; State; Zip Code
PO Box 2062
Austin, TX 78768-2062

(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: 4/43 Report: 6/59

2 FILER NAME Kitchen, Ann

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

08/04/2014

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

6 Contributor address; City; State; Zip Code
2315 Newfield Ln
Austin, TX 78703-2438

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

08/05/2014

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

Contributor address; City; State; Zip Code
300 Bowie St
Austin, TX 78703-4690

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

08/22/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Barnett, Charles and Carol

Contributor address; City; State; Zip Code
3999 Westlake Dr
Austin, TX 78746-1622

Amount of
contribution (\$)

\$700.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Board Chair

Employer (See Instructions)

Seton Healthcare family

Date

09/24/2014

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

Contributor address; City; State; Zip Code
2502 Barton Hills Dr
Austin, TX 78704-4506

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

07/22/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Beaver, Becky and John

Contributor address; City; State; Zip Code
816 Congress Ave
Austin, TX 78701-2638

Amount of
contribution (\$)

\$700.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Becky Beaver Attorney at Law

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 5/43 Report: 7/59

2 FILER NAME Kitchen, Ann

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

08/26/2014

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

6 Contributor address; City; State; Zip Code
3209 W William Cannon Dr
Austin, TX 78745-5030

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)
retired

10 Employer (See Instructions)
retired

Date

09/23/2014

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

Contributor address; City; State; Zip Code
3209 W William Cannon Dr
Austin, TX 78745-5030

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)
retired

Employer (See Instructions)
retired

Date

09/25/2014

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

Contributor address; City; State; Zip Code
3209 W William Cannon Dr
Austin, TX 78745-5030

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)
retired

Employer (See Instructions)
retired

Date

09/12/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Bell Metereau, Rebecca

Contributor address; City; State; Zip Code
129 Kathryn Cv
San Marcos, TX 78666-2299

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

08/24/2014

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

Contributor address; City; State; Zip Code
6607 Brodie Ln
Austin, TX 78745-4651

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/43 Report: 8/59	
2 FILER NAME Kitchen, Ann		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 07/21/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Berkel, Suzanne 6 Contributor address; City; State; Zip Code 4405 Sinclair Ave Austin, TX 78756-3220	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 08/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bernard, Jim Contributor address; City; State; Zip Code 7140 Chimney Cors Austin, TX 78731-2100	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) Finance		Employer (See Instructions) PSW Real Estate	
Date 08/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Black, Sinclair Contributor address; City; State; Zip Code 208 W 4th St Austin, TX 78701-3951	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Architect, Urban Designer		Employer (See Instructions) Black Vernoooy	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Blackson, Steve and Betty Contributor address; City; State; Zip Code 9803 Mandeville Cir Austin, TX 78750-2811	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 08/07/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bonner, Cathy Contributor address; City; State; Zip Code 4303 Canyonside Trl Austin, TX 78731-2858	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) Chairman		Employer (See Instructions) Service King	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 7/43 Report: 9/59	
2 FILER NAME Kitchen, Ann				3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 09/20/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Boone, Cecilia		7 Amount of contribution (\$) \$100.00		8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 6522 Belmead Dr Dallas, TX 75230-3004			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date 09/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brand, Jim		Amount of contribution (\$) \$200.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 802 Barton Blvd Austin, TX 78704-1409			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) physician			Employer (See Instructions) self		
Date 08/07/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brim, Jay		Amount of contribution (\$) \$100.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1309 Lost Creek Blvd Austin, TX 78746-6316			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 09/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bunch, Bill		Amount of contribution (\$) \$125.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1307 Oxford Ave Austin, TX 78704-2825			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 09/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Burgess, Karen		Amount of contribution (\$) \$350.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 700 Panther Creek Rd Driftwood, TX 78619-4205			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Attorney			Employer (See Instructions) Richardson + Burgess LLP		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/43 Report: 10/59	
2 FILER NAME Kitchen, Ann		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 09/15/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Burke, Cecelia 6 Contributor address; City; State; Zip Code 6500 Santolina Cv Austin, TX 78731-2806	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Burnett, Terrell Contributor address; City; State; Zip Code 1600 Barton Springs Rd Austin, TX 78704-1191	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chang Sheppard, Jade Contributor address; City; State; Zip Code 5001 Miss Julie Ln Austin, TX 78727-5806	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 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chenven, Norman Contributor address; City; State; Zip Code 3403 Spanish Oak Dr Austin, TX 78731-5213	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) Physician		Employer (See Instructions) Covenant Management Systems	
Date 09/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chimenti, Danette Contributor address; City; State; Zip Code 200 The Cir Austin, TX 78704-2418	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 9/43 Report: 11/59

2 FILER NAME Kitchen, Ann

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date

07/22/2014

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

6 Contributor address; City; State; Zip Code
7108 Doswell Ln
Austin, TX 78739-2042

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# _____)
Clark, Colin

09/19/2014

Contributor address; City; State; Zip Code
302 W Johanna St
Austin, TX 78704-4234

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# _____)
Clark, James

08/26/2014

Contributor address; City; State; Zip Code
2401 Forest Bend Dr
Austin, TX 78704-4525

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

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

09/05/2014

Contributor address; City; State; Zip Code
2401 Forest Bend Dr
Austin, TX 78704-4525

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

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

07/02/2014

Contributor address; City; State; Zip Code
3306 Gentry Dr
Rollingwood, TX 78746-5507

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: 10/43 Report: 12/59

2 FILER NAME Kitchen, Ann

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

09/01/2014

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

Cofer, Rick

6 Contributor address; City; State; Zip Code
507 Pressler St
Austin, TX 78703-5192

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

07/21/2014

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

Coldiron, Ron

Contributor address; City; State; Zip Code
6509 Marblewood Dr
Austin, TX 78731-1744

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

07/29/2014

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

Coleman-Beattie, Brenda

Contributor address; City; State; Zip Code
1111 E Cesar Chavez St
Austin, TX 78702-4209

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

09/14/2014

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

Colvin, Elizabeth

Contributor address; City; State; Zip Code
1932 Antone St
Austin, TX 78723-5443

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

09/24/2014

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

Cooper, Connie

Contributor address; City; State; Zip Code
13501 Bolivia Dr
Austin, TX 78729-8054

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

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1 PAGE #
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2 FILER NAME Kitchen, Ann

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date
09/15/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Cope Griffith, Susan

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

6 Contributor address; City; State; Zip Code
950 Westbank Dr
West Lake Hills, TX 78746-6684

\$350.00

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

9 Principal occupation / Job title (See Instructions)
real estate

10 Employer (See Instructions)
Amelia Bullock Realtors

Date
09/22/2014

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

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

Contributor address; City; State; Zip Code
3961 Park Gardens Dr
Santa Rosa, CA 95404-7611

\$100.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
07/01/2014

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

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

Contributor address; City; State; Zip Code
2800 Oak Crest Ave
Austin, TX 78704-6226

\$35.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
08/20/2014

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

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

Contributor address; City; State; Zip Code
2510 Camino Alto
Austin, TX 78746-2408

\$350.00

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

Principal occupation / Job title (See Instructions)
Executive Director

Employer (See Instructions)
Brookside Women's Medical Center

Date
08/27/2014

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

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

Contributor address; City; State; Zip Code
6112 Highlandale Dr
Austin, TX 78731-4006

\$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: 12/43 Report: 14/59

2 FILER NAME Kitchen, Ann

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date

09/25/2014

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

6 Contributor address; City; State; Zip Code
6112 Highlandale Dr
Austin, TX 78731-4006

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

07/18/2014

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

Contributor address; City; State; Zip Code
202 W 32nd St
Austin, TX 78705-2304

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Consulting Actuary

Employer (See Instructions)
Rudd and Wisdom, Inc.

Date

08/28/2014

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

Contributor address; City; State; Zip Code
503 Brookhaven Trl
Austin, TX 78746-5452

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

09/23/2014

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

Contributor address; City; State; Zip Code
5010 N Rim Dr
Austin, TX 78731-1122

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

08/27/2014

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

Contributor address; City; State; Zip Code
3511 Clearview Dr
Austin, TX 78703-2640

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

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2 FILER NAME Kitchen, Ann

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

08/18/2014

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

6 Contributor address; City; State; Zip Code
2312 Pruett St
Austin, TX 78703-4338

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

08/28/2014

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

Contributor address; City; State; Zip Code
1005 Lund St
Austin, TX 78704-2015

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

09/15/2014

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

Contributor address; City; State; Zip Code
30 Stageline Dr
Austin, TX 78640

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)
Office Manager

Employer (See Instructions)
Lockwood, Andrews & Newnam

Date

09/24/2014

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

Contributor address; City; State; Zip Code
404 Westwood Ter
Austin, TX 78746-5354

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

07/24/2014

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

Contributor address; City; State; Zip Code
2501 Crosswind Dr
Spicewood, TX 78669-5142

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Lawyer

Employer (See Instructions)
Cokinos, Boies & Young

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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1 PAGE #

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2 FILER NAME Kitchen, Ann

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date

08/18/2014

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

6 Contributor address; City; State; Zip Code
1705 Cresthaven Dr
Austin, TX 78704-2750

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

09/25/2014

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

Contributor address; City; State; Zip Code
703B E 50th St
Austin, TX 78751-2615

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

09/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Foster, David and Virginia

Contributor address; City; State; Zip Code
1902 Forestglade Dr
Austin, TX 78745-1725

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

08/10/2014

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

Contributor address; City; State; Zip Code
2025 Emma Long St
Austin, TX 78723-5392

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)
Professor

Employer (See Instructions)
UT Austin

Date

09/02/2014

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

Contributor address; City; State; Zip Code
1525 SW Park Ave
Portland, OR 97201-7810

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

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The INSTRUCTION GUIDE explains how to complete this form.

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2 FILER NAME Kitchen, Ann

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

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

07/27/2014

6 Contributor address; City; State; Zip Code
4314 Sinclair Ave
Austin, TX 78756-3219

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# _____)
Friedland, Curtis

09/24/2014

Contributor address; City; State; Zip Code
2604 S 2nd St
Austin, TX 78704-6202

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# _____)
Gammon, Bill

08/07/2014

Contributor address; City; State; Zip Code
1201 Spyglass Dr
Austin, TX 78746-6924

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)
Attorney

Employer (See Instructions)
Gammon Law Firm

Date

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

09/25/2014

Contributor address; City; State; Zip Code
8304 Zyle Rd
Austin, TX 78737-3403

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)
Attorney

Employer (See Instructions)
Gammon Law Firm

Date

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

09/25/2014

Contributor address; City; State; Zip Code
1211 Blair Way
Austin, TX 78704-5571

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

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2 FILER NAME Kitchen, Ann		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 09/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Garcia, Peter 6 Contributor address; City; State; Zip Code 2417 Amur Dr Austin, TX 78745-2067	7 Amount of contribution (\$) \$10.00	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 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Garza, Jesus Contributor address; City; State; Zip Code 5904 Quernus Cv Austin, TX 78735-5402	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 09/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gasquet, Hector L Contributor address; City; State; Zip Code 3209 John Campbells Trl Austin, TX 78735-6917	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gattuso, Cathy Contributor address; City; State; Zip Code 2200A Homedale Dr Austin, TX 78704-2759	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 09/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) George, Cheryl Contributor address; City; State; Zip Code 2501 Stratford Dr Austin, TX 78746-5755	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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1 PAGE #
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2 FILER NAME Kitchen, Ann

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date
08/26/2014

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

6 Contributor address; City; State; Zip Code
613 Hearn St
Austin, TX 78703-4517

7 Amount of contribution (\$)
\$25.00

8 In-kind contribution description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date
09/05/2014

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

Contributor address; City; State; Zip Code
2801 Via Fortuna
Austin, TX 78746-7573

Amount of contribution (\$)
\$250.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Gjerset & Lorenz LLP

Date
09/25/2014

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

Contributor address; City; State; Zip Code
305 Chippendale Ave
Austin, TX 78745-2377

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
09/20/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Goss, Linda Kay

Contributor address; City; State; Zip Code
9222 W Parmer Ln
Austin, TX 78717-4677

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)
State Farm

Employer (See Instructions)
Agent

Date
09/25/2014

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

Contributor address; City; State; Zip Code
3815 Avenue H
Austin, TX 78751-4718

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

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1 PAGE #

Schedule: 18/43 Report: 20/59

2 FILER NAME Kitchen, Ann

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date 5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Grant, Kathy

09/22/2014

6 Contributor address; City; State; Zip Code
915 W Johanna St
Austin, TX 78704-4131

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)
Government Affairs Consultant

10 Employer (See Instructions)
Self

Date Full name of contributor ☐ out-of-state PAC (ID# _____)
Guthikonda, Gopal and Amini

09/21/2014

Contributor address; City; State; Zip Code
PO Box 200388
Austin, TX 78720-0388

Amount of
contribution (\$)

\$700.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Engineer

Employer (See Instructions)
CP&Y Inc.

Date Full name of contributor ☐ out-of-state PAC (ID# _____)
Haenn, Meg

09/25/2014

Contributor address; City; State; Zip Code
901 Longview Cir
Dripping Springs, TX 78620-3523

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

09/25/2014

Contributor address; City; State; Zip Code
3408 Mt. Bonnell Rd.
Austin, TX 78731

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
DLA Piper LLP (US)

Date Full name of contributor ☐ out-of-state PAC (ID# _____)
Hale, Bryan

08/05/2014

Contributor address; City; State; Zip Code
1300 Windsor Rd
Austin, TX 78703-4112

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)
Chemist

Employer (See Instructions)
SACHEM, Inc.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME Kitchen, Ann		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 09/06/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hand, Mark 6 Contributor address; City; State; Zip Code 2313B La Casa Dr Austin, TX 78704-3822	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 08/27/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hansen, Yvonne Contributor address; City; State; Zip Code 6206 Hillston Dr Austin, TX 78745-4351	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/15/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harding, Annie Contributor address; City; State; Zip Code 3505 Grooms St Austin, TX 78705-1624	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) Associate Producer		Employer (See Instructions) Armadillo Christmas Bazaar	
Date 08/27/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harris, Lisa Contributor address; City; State; Zip Code 4522 Avenue F Austin, TX 78751-3109	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 08/07/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hatch, Thomas Contributor address; City; State; Zip Code 1102B E 8th St Austin, TX 78702-3225	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) architecture		Employer (See Instructions) h+uo architects	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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1 PAGE #

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2 FILER NAME Kitchen, Ann

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date

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

09/04/2014

6 Contributor address; City; State; Zip Code
PO Box 876
Liberty, TX 77575-0876

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# _____)
Heidrick, Chris

07/07/2014

Contributor address; City; State; Zip Code
3511 Fawn Trl
Austin, TX 78746-1463

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)
Contractor

Employer (See Instructions)
Chris Heidrick

Date

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

09/25/2014

Contributor address; City; State; Zip Code
221 W 6th St
Austin, TX 78701-3415

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

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

08/21/2014

Contributor address; City; State; Zip Code
2512 Great Oaks Pkwy
Austin, TX 78756-2908

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

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

09/24/2014

Contributor address; City; State; Zip Code
2512 Great Oaks Pkwy
Austin, TX 78756-2908

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

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2 FILER NAME Kitchen, Ann

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

08/26/2014

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

Hess, Myron

6 Contributor address; City; State; Zip Code

1705 Margaret St
Austin, TX 78704-2121

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

09/24/2014

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

Hilgers, David

Contributor address; City; State; Zip Code

701 Yaupon Valley Rd
West Lake Hills, TX 78746-3545

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
attorney

Employer (See Instructions)
husch blackwell llp

Date

09/25/2014

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

Hiser, Deborah

Contributor address; City; State; Zip Code

5321 Western Hills Dr
Austin, TX 78731-4852

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

09/17/2014

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

Holmes, Harry

Contributor address; City; State; Zip Code

PO Box 1191
Houston, TX 77251-1191

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

09/22/2014

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

Howard, Derek

Contributor address; City; State; Zip Code

2005 Lakeshore Dr
Austin, TX 78746-2906

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)
Attorney

Employer (See Instructions)
Howard & Kobelan

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 22/43 Report: 24/59

2 FILER NAME Kitchen, Ann

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

07/08/2014

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

6 Contributor address; City; State; Zip Code
8601 Emerald Hill Dr
Austin, TX 78759-8014

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

08/27/2014

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

Contributor address; City; State; Zip Code
2315 Westforest Dr
Austin, TX 78704-5809

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

09/24/2014

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

Contributor address; City; State; Zip Code
500 E Riverside Dr
Austin, TX 78704-1345

Amount of
contribution (\$)

\$500.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
General Manager

Employer (See Instructions)
Texas Office Products

Date

09/20/2014

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

Contributor address; City; State; Zip Code
908 Bluebonnet Ln
Austin, TX 78704-2002

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

08/25/2014

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

Contributor address; City; State; Zip Code
2607 Trail Of The Madrones
Austin, TX 78746-2342

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: 23/43 Report: 25/59

2 FILER NAME Kitchen, Ann

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date

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

Jackson, Charlie

09/02/2014

6 Contributor address; City; State; Zip Code
11900 Metric Blvd
Austin, TX 78758-3152

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

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

Jackson, Robena

09/25/2014

Contributor address; City; State; Zip Code
5900 Rain Creek Pkwy
Austin, TX 78759-5535

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Johnson, D'Ann

08/05/2014

Contributor address; City; State; Zip Code
1604 E 11th St
Austin, TX 78702-2716

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Johnson, Ron Kim

09/24/2014

Contributor address; City; State; Zip Code
2608 Del Curto Rd
Austin, TX 78704-6014

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)
Technology consulting

Employer (See Instructions)
Ringful Health

Date

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

Katz, Hal

08/25/2014

Contributor address; City; State; Zip Code
111 Congress Ave
Austin, TX 78701-4093

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Husch Blackwell

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 24/43 Report: 26/59

2 FILER NAME Kitchen, Ann

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date

07/15/2014

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

6 Contributor address; City; State; Zip Code
3905 Ridgelea Dr
Austin, TX 78731-6126

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

08/14/2014

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

Contributor address; City; State; Zip Code

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)
Government Relations

Employer (See Instructions)
Blackridge

Date

09/25/2014

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

Contributor address; City; State; Zip Code
2409 Vassal Dr
Austin, TX 78748-5263

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

09/05/2014

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

Contributor address; City; State; Zip Code
4115 Abingdon Dr
Garland, TX 75043-7251

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)
COO

Employer (See Instructions)
Force Multiplier Solutions, Inc.

Date

09/17/2014

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

Contributor address; City; State; Zip Code
4115 Abingdon Dr
Garland, TX 75043-7251

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)
Homemaker

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 25/43 Report: 27/59

2 FILER NAME Kitchen, Ann

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

09/20/2014

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

Khataw, Ali

6 Contributor address; City; State; Zip Code
7914 Bee Cave Rd
Austin, TX 78746-4903

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)
CEO

10 Employer (See Instructions)
Encotech Engineering

Date

08/25/2014

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

Kirk, David

Contributor address; City; State; Zip Code
1503 Westover Rd
Austin, TX 78703-1911

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

09/25/2014

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

Kitchen, Joe and Joan

Contributor address; City; State; Zip Code
15827 Stonehaven Dr
Houston, TX 77059-4636

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

09/22/2014

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

Kitchen, Paul

Contributor address; City; State; Zip Code
3233 Forest Hill East Rd
La Grange, TX 78945-4439

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

09/20/2014

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

Kitchen, Primrose

Contributor address; City; State; Zip Code
1034 Liberty Park Dr
Austin, TX 78746-6853

Amount of contribution (\$)

\$250.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
retired

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 26/43 Report: 28/59

2 FILER NAME Kitchen, Ann

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date

09/25/2014

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

6 Contributor address; City; State; Zip Code
2604 Berkett Dr
Austin, TX 78745

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

09/24/2014

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

Contributor address; City; State; Zip Code
4204 Sinclair Ave
Austin, TX 78756-3527

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

09/05/2014

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

Contributor address; City; State; Zip Code
3112 Sunland Dr
Austin, TX 78748-2069

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

09/12/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Leonard, Robert and Linda

Contributor address; City; State; Zip Code
7122 Royal Ln
Dallas, TX 75230-3608

Amount of
contribution (\$)

\$700.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Chairman and CEO

Employer (See Instructions)
Force Multiplier Solutions, Inc.

Date

07/30/2014

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

Contributor address; City; State; Zip Code
3410 Windsor Rd
Austin, TX 78703-2248

Amount of
contribution (\$)

\$150.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 27/43 Report: 29/59

2 FILER NAME Kitchen, Ann

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

09/24/2014

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

Lipscombe, John

6 Contributor address; City; State; Zip Code

6600 Mesa Dr
Austin, TX 78731-2706

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

07/22/2014

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

Little, Emily

Contributor address; City; State; Zip Code

1001 E 8th St
Austin, TX 78702-3248

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

07/09/2014

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

London, Alice

Contributor address; City; State; Zip Code

101 Ridgmont Ct
West Lake Hills, TX 78746-5498

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)
attorney

Employer (See Instructions)
Bishop, London & Dodds

Date

08/07/2014

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

Longoria, Eduardo and Sofia

Contributor address; City; State; Zip Code

1508 Norris Dr
Austin, TX 78704-2021

Amount of
contribution (\$)

\$700.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Manager

Employer (See Instructions)
Casa de Luz, Center for Integral Studies

Date

08/25/2014

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

Lowe, Claudette

Contributor address; City; State; Zip Code

400 Academy Dr
Austin, TX 78704-1813

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)
realtor

Employer (See Instructions)
retired

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 28/43 Report: 30/59

2 FILER NAME Kitchen, Ann

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date 09/25/2014 5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Lubomudrov, Andrei

6 Contributor address; City; State; Zip Code
1701 E 14th St
Austin, TX 78702-1201

7 Amount of contribution (\$)

\$25.00

8 In-kind contribution description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date 09/25/2014 Full name of contributor ☐ out-of-state PAC (ID# _____)
Lungwitz, Jeana

Contributor address; City; State; Zip Code
806 Josephine St
Austin, TX 78704-1536

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 09/16/2014 Full name of contributor ☐ out-of-state PAC (ID# _____)
Madry, Lisa

Contributor address; City; State; Zip Code
2808 Nordham Dr
Austin, TX 78745-4740

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 08/30/2014 Full name of contributor ☐ out-of-state PAC (ID# _____)
Maier, Richard

Contributor address; City; State; Zip Code
704 E 45th 1/2 St
Austin, TX 78751-4025

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)
Homebuilder

Employer (See Instructions)
DR Horton

Date 09/22/2014 Full name of contributor ☐ out-of-state PAC (ID# _____)
Mangan, Andrew

Contributor address; City; State; Zip Code
1600 Barton Springs Rd
Austin, TX 78704-1081

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: 29/43 Report: 31/59	
2 FILER NAME Kitchen, Ann				3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 09/22/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Marwitz, David		7 Amount of contribution (\$) \$100.00		8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code PO Box 50550 Austin, TX 78763-0550			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date 07/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mathis, Mary Nell		Amount of contribution (\$) \$50.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 6300 Mercedes Bnd Austin, TX 78759-6121			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 07/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McCreary, Lou		Amount of contribution (\$) \$150.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1108 Snowy Owl Ct Austin, TX 78746-6647			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 08/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mcgill, John		Amount of contribution (\$) \$100.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2111 Airole Way Austin, TX 78704-3261			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McHorse, Edward		Amount of contribution (\$) \$50.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 5202 Turnabout Ln Austin, TX 78731-5634			(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: 30/43 Report: 32/59	
2 FILER NAME Kitchen, Ann				3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 09/04/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McKenzie, JoAnn		7 Amount of contribution (\$) \$350.00		8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 6902 Edgefield Dr Austin, TX 78731-2908		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
9 Principal occupation / Job title (See Instructions) financial planning			10 Employer (See Instructions) JoAnn McKenzie LLC		
Date 09/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mckinney, Eleanor		Amount of contribution (\$) \$50.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2007 Kinney Ave Austin, TX 78704-4007		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 07/31/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Meissner, Wayne		Amount of contribution (\$) \$100.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 812 San Antonio St Austin, TX 78701-2224		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mendoza, Rosie		Amount of contribution (\$) \$200.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2512 S Interstate 35 Austin, TX 78704-5716		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions) CPA			Employer (See Instructions) R. Mendoza & Co. P.C.		
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Metcalfe, Steve		Amount of contribution (\$) \$50.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4312 Rio Robles Dr Austin, TX 78746-1993		(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: 31/43 Report: 33/59

2 FILER NAME Kitchen, Ann

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date
09/16/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Michener, Elizabeth and Patrick

6 Contributor address; City; State; Zip Code
146 18th St
New Orleans, LA 70124-1226

7 Amount of contribution (\$)
\$700.00

8 In-kind contribution description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
Executive Assistant

10 Employer (See Instructions)
Force Multiplier Solutions, Inc

Date
09/22/2014

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

Contributor address; City; State; Zip Code
11402 June Dr
Austin, TX 78753-2927

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
09/18/2014

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

Contributor address; City; State; Zip Code
4300 Rosedale Ave
Austin, TX 78756-3222

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
09/25/2014

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

Contributor address; City; State; Zip Code
8108 Asmara Dr
Austin, TX 78750-7808

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
09/04/2014

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

Contributor address; City; State; Zip Code
4203 Farhills Dr
Austin, TX 78731-2813

Amount of contribution (\$)
\$250.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)
retired

Employer (See Instructions)
retired

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 32/43 Report: 34/59

2 FILER NAME Kitchen, Ann

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

08/23/2014

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

Nasworthy, Carol

6 Contributor address; City; State; Zip Code

10717 Sans Souci Pl
Austin, TX 78759-5182

7 Amount of
contribution (\$)

\$25.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

09/22/2014

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

Oden, Michael

Contributor address; City; State; Zip Code

3213 French Pl
Austin, TX 78722-1917

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)

Professor

Employer (See Instructions)

University of Texas

Date

09/25/2014

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

Ott, David

Contributor address; City; State; Zip Code

5847 San Felipe St
Houston, TX 77057-3263

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)

Real Estate Development

Employer (See Instructions)

The Hanover Company

Date

07/31/2014

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

Patterson, Grania

Contributor address; City; State; Zip Code

6704 Manchaca Rd
Austin, TX 78745-4980

Amount of
contribution (\$)

\$20.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/24/2014

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

Patterson, Grania

Contributor address; City; State; Zip Code

6704 Manchaca Rd
Austin, TX 78745-4980

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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1 PAGE #

Schedule: 33/43 Report: 35/59

2 FILER NAME Kitchen, Ann

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

09/23/2014

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

Phillips, Barbara

6 Contributor address; City; State; Zip Code

112 Highlander Cv
Lakeway, TX 78734-4326

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

09/22/2014

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

Plunkett Nichols, Mark and Jill

Contributor address; City; State; Zip Code

1500 Cliffside Dr
Austin, TX 78704-2706

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Physicans

Employer (See Instructions)
Eye Physicans of Austin

Date

07/08/2014

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

Polikov, Scott

Contributor address; City; State; Zip Code

3000 Blackburn St
Dallas, TX 75204-2205

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)
town planner

Employer (See Instructions)
Gateway Planning

Date

09/03/2014

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

Powell, Anna

Contributor address; City; State; Zip Code

2406 Berkeley Ave
Austin, TX 78745-4305

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

09/02/2014

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

Rachofsky, Marcia

Contributor address; City; State; Zip Code

2103 Fair Oaks Dr
Austin, TX 78745-2749

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: 34/43 Report: 36/59

2 FILER NAME Kitchen, Ann

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

09/25/2014

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

Roach, Mary Margaret

6 Contributor address; City; State; Zip Code

9000 Queenswood Dr
Austin, TX 78748-5228

7 Amount of
contribution (\$)

\$25.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

09/25/2014

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

Robertson, Charles

Contributor address; City; State; Zip Code

1010 Oak Meadow Dr
Dripping Springs, TX 78620-3949

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

08/20/2014

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

Rodriguez, Eddie

Contributor address; City; State; Zip Code

PO Box 2436
Austin, TX 78768-2436

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

09/25/2014

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

Rodriguez, Jim & Rita

Contributor address; City; State; Zip Code

5117 Prairie Dunes Dr
Austin, TX 78747-1473

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

09/25/2014

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

Rogerson Lynch, Michelle

Contributor address; City; State; Zip Code

2634 Cascade Falls Dr
Austin, TX 78738-5315

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: 35/43 Report: 37/59

2 FILER NAME Kitchen, Ann

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

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

Ross, Lauren

07/05/2014

6 Contributor address; City; State; Zip Code

1405 Hillmont St
Austin, TX 78704-1520

7 Amount of
contribution (\$)

\$200.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
Engineer

10 Employer (See Instructions)
Glenrose Engineering

Date

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

Ruiz, Olivia

09/23/2014

Contributor address; City; State; Zip Code

1105 Toyath St
Austin, TX 78703-3920

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)
Attorney

Employer (See Instructions)
Law Office of Olivia B. Ruiz

Date

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

Rutishauser, Robert

08/03/2014

Contributor address; City; State; Zip Code

4200 Jackson Ave
Austin, TX 78731-6061

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)
none

Date

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

Safady, Edward

07/14/2014

Contributor address; City; State; Zip Code

PO Box 99
Austin, TX 78767-0099

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

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

Sanger, Mary

07/29/2014

Contributor address; City; State; Zip Code

704 Carolyn Ave
Austin, TX 78705-1712

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)
Researcher

Employer (See Instructions)
Self

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 36/43 Report: 38/59

2 FILER NAME Kitchen, Ann

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

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

Self, Steven

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

09/22/2014

6 Contributor address; City; State; Zip Code
2403 Briargrove Dr
Austin, TX 78704-2701

\$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# _____)

Shea, Mr. and Mrs. Mike

(Mike & Toni)

Amount of contribution (\$)

In-kind contribution description (if applicable)

09/22/2014

Contributor address; City; State; Zip Code
4801 Broken Bow Pass
Austin, TX 78745-2833

\$700.00

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

Principal occupation / Job title (See Instructions)
Executive Director

Employer (See Instructions)
SXSW, LLC

Date

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

Siff, Ted

Amount of contribution (\$)

In-kind contribution description (if applicable)

09/25/2014

Contributor address; City; State; Zip Code
604 W 11th St
Austin, TX 78701-2007

\$150.00

(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# _____)

Sifuentes, Marina

Amount of contribution (\$)

In-kind contribution description (if applicable)

09/18/2014

Contributor address; City; State; Zip Code

\$350.00

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

Principal occupation / Job title (See Instructions)
Pharmacist

Employer (See Instructions)
Brookside Women's Medical Center

Date

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

Smith, Daniel

Amount of contribution (\$)

In-kind contribution description (if applicable)

09/23/2014

Contributor address; City; State; Zip Code
6807 Hardy Dr
Austin, TX 78757-2499

\$10.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 37/43 Report: 39/59	
2 FILER NAME Kitchen, Ann				3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 07/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Sherry		7 Amount of contribution (\$) \$350.00		8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 2512 Wooldridge Dr Austin, TX 78703-2536			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions) Education			10 Employer (See Instructions) Retired AISD teacher		
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Southwest Laborers District Council SWLDC PAC		Amount of contribution (\$) \$350.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 5555 N Lamar Ave Suite E121 Austin, TX 78751			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Squyres, Donna		Amount of contribution (\$) \$25.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1110 W 7th St Austin, TX 78703-5306			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 08/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stallings, Robin		Amount of contribution (\$) \$100.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2208 Santa Rosa St Austin, TX 78702-4628			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stanley, Alfred		Amount of contribution (\$) \$250.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1409 Hardouin Ave Austin, TX 78703-2516			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Owner			Employer (See Instructions) Alfred Stanley & Associates		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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1 PAGE #
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2 FILER NAME Kitchen, Ann

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date
5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Stiles, Peter

09/01/2014

6 Contributor address; City; State; Zip Code
1801 Anita Dr
Austin, TX 78704-2813

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# _____)
Stonewall Democrats of Austin, PAC

09/10/2014

Contributor address; City; State; Zip Code
PO Box 40898
Austin, TX 78704-0015

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# _____)
Stuart, Carl

09/24/2014

Contributor address; City; State; Zip Code
2502 Velasquez Dr
Austin, TX 78703-1545

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

08/07/2014

Contributor address; City; State; Zip Code
3605 Windsor Rd
Austin, TX 78703-1508

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# _____)
Swan, Laurie

08/05/2014

Contributor address; City; State; Zip Code
2518 Tanglewood Trl
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)
VP

Employer (See Instructions)
Stratus Properties

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 39/43 Report: 41/59	
2 FILER NAME Kitchen, Ann		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 09/24/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Swartwood, Alison 6 Contributor address; City; State; Zip Code 12604 Rush Creek Ln Austin, TX 78732-1992	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) homemaker		10 Employer (See Instructions) homemaker	
Date 09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Swartwood, Slater Jr. Contributor address; City; State; Zip Code 12604 Rush Creek Ln Austin, TX 78732-1992	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) Marketing		Employer (See Instructions) Force Multiplier Solutions/BusGuard	
Date 09/11/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Swartwood, Slater and Kathryn Sr. Contributor address; City; State; Zip Code 2018 General Pershing St New Orleans, LA 70115-5436	Amount of contribution (\$) \$700.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) EVP		Employer (See Instructions) Force Multiplier Solutions, Inc.	
Date 08/15/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tate, Kerry Contributor address; City; State; Zip Code 12140 Tunnel Trl Manchaca, TX 78652-3828	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) homebuilder		Employer (See Instructions) moore-tate	
Date 09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tawil, Carmen Contributor address; City; State; Zip Code 4806 Balcones Dr Austin, TX 78731-5309	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) Managing Partner		Employer (See Instructions) Corridor Television	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 40/43 Report: 42/59

2 FILER NAME Kitchen, Ann

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

07/21/2014

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

Thoma-Isgur, Shoshana

6 Contributor address; City; State; Zip Code

2504 Sandage Ave
Fort Worth, TX 76109-1417

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)

Hays and Boone

10 Employer (See Instructions)

Attorney

Date

09/10/2014

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

Tollett, Blake

Contributor address; City; State; Zip Code

PO Box 973
Austin, TX 78767-0973

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)

Attorney

Employer (See Instructions)

Self

Date

09/23/2014

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

Umphress, Johnny

Contributor address; City; State; Zip Code

2604 Geraghty
Austin, TX 78757

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)

Consultant

Employer (See Instructions)

Austin Energy

Date

09/02/2014

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

Van Oort, Gijs

Contributor address; City; State; Zip Code

29144 Old Fredericksburg Rd
Boerne, TX 78015-9101

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

07/30/2014

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

Varty, Helen

Contributor address; City; State; Zip Code

3405 Santa Monica Dr
Austin, TX 78741-7023

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

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1 PAGE #

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2 FILER NAME Kitchen, Ann

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

09/23/2014

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

Walker, Susan

6 Contributor address; City; State; Zip Code

1306 Lorrain St
Austin, TX 78703-4021

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)
manager

10 Employer (See Instructions)
Tried & True Music

Date

09/23/2014

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

Warner, David

Contributor address; City; State; Zip Code

5701 Trailridge Dr
Austin, TX 78731-4226

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

08/15/2014

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

Weeks, Joelyn

Contributor address; City; State; Zip Code

6805 Moonmont Dr
Austin, TX 78745-5631

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

07/01/2014

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

Wheat, Sarah

Contributor address; City; State; Zip Code

1806 Westridge Drive
Austin, TX 78704-3221

Amount of
contribution (\$)

\$175.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/25/2014

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

Wisdom, Barbara

Contributor address; City; State; Zip Code

2217 Marcus Abrams Blvd
Austin, TX 78748

Amount of
contribution (\$)

\$20.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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1 PAGE #

Schedule: 42/43 Report: 44/59

2 FILER NAME Kitchen, Ann

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

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

7 Amount of
contribution (\$)

8 In-kind contribution
description (if applicable)

09/25/2014

6 Contributor address; City; State; Zip Code
1206 W 8th St
Austin, TX 78703-5279

\$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# _____)
Wood, Marge

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

09/25/2014

Contributor address; City; State; Zip Code
2303 Comburg Castle Way
Austin, TX 78748-5215

\$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# _____)
Yantis, Emily

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

09/06/2014

Contributor address; City; State; Zip Code
2715 Inridge Dr
Austin, TX 78745-5964

\$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# _____)
Yantis, Emily

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

09/25/2014

Contributor address; City; State; Zip Code
2715 Inridge Dr
Austin, TX 78745-5964

\$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# _____)
Young, Linda

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

07/30/2014

Contributor address; City; State; Zip Code
7000 Timarou Ter
Austin, TX 78754-5738

\$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: 43/43 Report: 45/59

2 FILER NAME Kitchen, Ann

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

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

Yznaga, Barbara

09/25/2014

6 Contributor address; City; State; Zip Code

4300 Woodway Dr
Austin, TX 78731-2037

7 Amount of
contribution (\$)

\$25.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

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

Yznaga, Elizabeth and John

09/25/2014

Contributor address; City; State; Zip Code

1079 Pine Dr
Felton, CA 95018-9102

Amount of
contribution (\$)

\$500.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
midwife

Employer (See Instructions)
usf

Date

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

Yznaga, Mary

08/17/2014

Contributor address; City; State; Zip Code

4616 Triangle Ave
Austin, TX 78751-3501

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)
artist

Employer (See Instructions)
self

Date

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

Zandan, Peter

09/25/2014

Contributor address; City; State; Zip Code

98 San Jacinto
Austin, TX 78701

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)

LOANS**SCHEDULE E**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/1 Report: 46/59	
2 FILER NAME Kitchen, Ann		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 TOTAL OF UNITEMIZED LOANS: ⇨⇨⇨⇨⇨⇨			\$
5 Date of loan 09/25/2014	7 Name of lender Kitchen, Ann <input type="checkbox"/> out-of-state PAC (ID# _____)		9 Loan Amount (\$) \$17,500.00
6 Is lender a financial Institution? No	8 Lender address; City; State; Zip Code 2401 Briargrove Austin, TX 78704		10 Interest rate
			11 Maturity date 12/31/2014
12 Principal occupation / Job title (See Instructions) Healthcare Advocate		13 Employer (See Instructions) Self	
14 Description of Collateral <input checked="" type="checkbox"/> none		15 Check if personal funds were deposited into political account <input checked="" type="checkbox"/>	
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor 18 Guarantor address; City; State; Zip Code		19 Amount Guaranteed (\$)
20 Principal Occupation		21 Employer	

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: 47/59		2 FILER NAME Kitchen, Ann		3 ACCOUNT # (TEC filers) 00000001
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4 Date 07/17/2014	5 Payee name ADOBE SYSTEMS INC			
6 Amount (\$) \$21.64	7 Payee address City; State; Zip Code 345 Park Avenue San Jose, CA 95110			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> software	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:

Date 08/18/2014	Payee name ADOBE SYSTEMS INC			
Amount (\$) \$21.64	Payee address City; State; Zip Code 345 Park Avenue San Jose, CA 95110			
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"/> software	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:

Date 09/17/2014	Payee name ADOBE SYSTEMS INC			
Amount (\$) \$21.64	Payee address City; State; Zip Code 345 Park Avenue San Jose, CA 95110			
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"/> Software	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:

Date 07/11/2014	Payee name ADP, INC.			
Amount (\$) \$73.55	Payee address City; State; Zip Code One ADP Drive MS-100 Augusta, GA 30909			
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"/> Payroll Fees	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 2/13 Report: 48/59		2 FILER NAME Kitchen, Ann		3 ACCOUNT # (TEC filers) 00000001	
4 Date 08/01/2014	5 Payee name ADP, INC.				
6 Amount (\$) \$344.25	7 Payee address City: State; Zip Code One ADP Drive MS-100 Augusta, GA 30909				
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"/> Payroll Taxes		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 08/18/2014	Payee name ADP, INC.				
Amount (\$) \$73.55	Payee address City: State; Zip Code One ADP Drive MS-100 Augusta, GA 30909				
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"/> Payroll Fees		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 09/01/2014	Payee name ADP, INC.				
Amount (\$) \$344.25	Payee address City: State; Zip Code One ADP Drive MS-100 Augusta, GA 30909				
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"/> Payroll Taxes		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 09/12/2014	Payee name ADP, INC.				
Amount (\$) \$73.55	Payee address City: State; Zip Code One ADP Drive MS-100 Augusta, GA 30909				
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"/> Taxes		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
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: 49/59		2 FILER NAME Kitchen, Ann		3 ACCOUNT # (TEC filers) 00000001	
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4 Date 07/09/2014	5 Payee name AT&T				
6 Amount (\$) \$117.31	7 Payee address City; State; Zip Code PO Box 537104 Atlanta, GA 30353-7104				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign cell phone		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

Date 08/11/2014	Payee name AT&T				
Amount (\$) \$72.93	Payee address City; State; Zip Code PO Box 537104 Atlanta, GA 30353-7104				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> campaign phone		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

Date 09/09/2014	Payee name AT&T				
Amount (\$) \$72.93	Payee address City; State; Zip Code PO Box 537104 Atlanta, GA 30353-7104				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Phone		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

Date 08/05/2014	Payee name Central Market				
Amount (\$) \$44.16	Payee address City; State; Zip Code 4477 S Lamar Blvd Austin, TX 78745				
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"/> food for house party		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 4/13 Report: 50/59		2 FILER NAME Kitchen, Ann		3 ACCOUNT # (TEC filers) 00000001
4 Date 09/08/2014	5 Payee name Central Market			
6 Amount (\$) \$37.04	7 Payee address City; State; Zip Code 4477 S Lamar Blvd Austin, TX 78745			
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"/> Food for House Party	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 07/01/2014	Payee name Fine, Kristin			
Amount (\$) \$344.25	Payee address City; State; Zip Code 2404 Burly Oak Drive Austin, TX 78745			
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"/> Payroll Taxes	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 07/01/2014	Payee name Fine, Kristin			
Amount (\$) \$4,250.00	Payee address City; State; Zip Code 2404 Burly Oak Drive 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	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 07/28/2014	Payee name Fine, Kristin			
Amount (\$) \$300.00	Payee address City; State; Zip Code 2404 Burly Oak Drive 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"/> Healthcare	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
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: 51/59		2 FILER NAME Kitchen, Ann		3 ACCOUNT # (TEC filers) 00000001	
4 Date 08/01/2014	5 Payee name Fine, Kristin				
6 Amount (\$) \$4,250.00	7 Payee address City: State: Zip Code 2404 Burly Oak Drive 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 <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 08/29/2014	Payee name Fine, Kristin				
Amount (\$) \$300.00	Payee address City: State: Zip Code 2404 Burly Oak Drive 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"/> Healthcare <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 09/01/2014	Payee name Fine, Kristin				
Amount (\$) \$4,250.00	Payee address City: State: Zip Code 2404 Burly Oak Drive 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 <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 07/14/2014	Payee name Genet, Kathy				
Amount (\$) \$541.88	Payee address City: State: Zip Code 3000 Kirby Lane Austin, TX 78703				
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 <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 6/13 Report: 52/59		2 FILER NAME Kitchen, Ann		3 ACCOUNT # (TEC filers) 00000001
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4 Date 07/01/2014	5 Payee name GNI Consulting, LLC			
6 Amount (\$) \$2,882.35	7 Payee address City; State; Zip Code P.O. Box 685008 Austin, TX 78768			
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"/> General Consulting	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:

Date 07/01/2014	Payee name GNI Consulting, LLC			
Amount (\$) \$2,882.35	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) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> General Consulting	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:

Date 08/12/2014	Payee name GNI Consulting, LLC			
Amount (\$) \$2,000.00	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) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> General Consulting	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:

Date 08/20/2014	Payee name Kelly Graphics			
Amount (\$) \$941.49	Payee address City; State; Zip Code 1409 Quaker Ridge Dr 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"/> printing	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 7/13 Report: 53/59		2 FILER NAME Kitchen, Ann		3 ACCOUNT # (TEC filers) 00000001
4 Date 09/08/2014	5 Payee name NGP VAN, Inc.			
6 Amount (\$) \$960.00	7 Payee address City; State; Zip Code 1101 15th Street, NW Suite 500 Washington, DC 20005			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fundraising Software	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 09/15/2014	Payee name Office Depot			
Amount (\$) \$18.37	Payee address City; State; Zip Code 2101 S Lamar 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"/> Supplies	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 07/02/2014	Payee name Sage Payment Solutions			
Amount (\$) \$754.56	Payee address City; State; Zip Code 1750 Old Meadow Road #300 McLean, VA 22102			
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"/> Credit Card Contribution Fees	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 08/04/2014	Payee name Sage Payment Solutions			
Amount (\$) \$337.27	Payee address City; State; Zip Code 1750 Old Meadow Road #300 McLean, VA 22102			
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"/> Credit Card Contribution Fees	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
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: 54/59		2 FILER NAME Kitchen, Ann		3 ACCOUNT # (TEC filers) 00000001	
4 Date 09/02/2014		5 Payee name Sage Payment Solutions			
6 Amount (\$) \$291.59		7 Payee address City; State; Zip Code 1750 Old Meadow Road #300 McLean, VA 22102			
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"/> Credit Card Contribution Fees	
				<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 07/09/2014		Payee name Texas Made Productions LLC			
Amount (\$) \$350.00		Payee address City; State; Zip Code 3707 Manchaca #177 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"/> Video	
				<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 07/24/2014		Payee name USPS			
Amount (\$) \$49.00		Payee address City; State; Zip Code 7310 Manchaca RD Austin, TX 78745			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> postage	
				<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 07/25/2014		Payee name USPS			
Amount (\$) \$49.00		Payee address City; State; Zip Code 7310 Manchaca RD Austin, TX 78745			
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"/> postage	
				<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
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: 55/59		2 FILER NAME Kitchen, Ann		3 ACCOUNT # (TEC filers) 00000001	
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4 Date 08/18/2014	5 Payee name USPS				
6 Amount (\$) \$44.10	7 Payee address City; State; Zip Code 7310 Manchaca RD Austin, TX 78745				
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"/> Postage		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name _____ Office sought: _____ Office held: _____				

Date 08/18/2014	Payee name USPS				
Amount (\$) \$44.10	Payee address City; State; Zip Code 7310 Manchaca RD Austin, TX 78745				
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"/> postage		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name _____ Office sought: _____ Office held: _____				

Date 08/18/2014	Payee name USPS				
Amount (\$) \$49.00	Payee address City; State; Zip Code 7310 Manchaca RD Austin, TX 78745				
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"/> postage		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name _____ Office sought: _____ Office held: _____				

Date 08/18/2014	Payee name USPS				
Amount (\$) \$44.10	Payee address City; State; Zip Code 7310 Manchaca RD Austin, TX 78745				
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"/> postage		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
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: 56/59		2 FILER NAME Kitchen, Ann		3 ACCOUNT # (TEC filers) 00000001	
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4 Date 08/18/2014	5 Payee name USPS				
6 Amount (\$) \$44.10	7 Payee address City; State; Zip Code 7310 Manchaca RD Austin, TX 78745				
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"/> postage		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

Date 08/18/2014	Payee name USPS				
Amount (\$) \$44.10	Payee address City; State; Zip Code 7310 Manchaca RD Austin, TX 78745				
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"/> postage		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

Date 08/18/2014	Payee name USPS				
Amount (\$) \$44.10	Payee address City; State; Zip Code 7310 Manchaca RD Austin, TX 78745				
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"/> postage		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

Date 08/18/2014	Payee name USPS				
Amount (\$) \$44.10	Payee address City; State; Zip Code 7310 Manchaca RD Austin, TX 78745				
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"/> postage		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
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: 57/59		2 FILER NAME Kitchen, Ann		3 ACCOUNT # (TEC filers) 00000001
--	--	-------------------------------------	--	---

4 Date 08/18/2014	5 Payee name USPS			
6 Amount (\$) \$44.10	7 Payee address City; State; Zip Code 7310 Manchaca RD Austin, TX 78745			
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"/> Postage	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:

Date 08/18/2014	Payee name USPS			
Amount (\$) \$49.00	Payee address City; State; Zip Code 7310 Manchaca RD Austin, TX 78745			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> postage	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:

Date 08/18/2014	Payee name USPS			
Amount (\$) \$44.10	Payee address City; State; Zip Code 7310 Manchaca RD Austin, TX 78745			
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"/> postage	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:

Date 08/18/2014	Payee name USPS			
Amount (\$) \$44.10	Payee address City; State; Zip Code 7310 Manchaca RD Austin, TX 78745			
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"/> postage	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
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: 58/59		2 FILER NAME Kitchen, Ann		3 ACCOUNT # (TEC filers) 00000001	
4 Date 09/22/2014		5 Payee name USPS			
6 Amount (\$) \$14.70		7 Payee address City: State: Zip Code 7310 Manchaca RD Austin, TX 78745			
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"/> Postage <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/22/2014		Payee name USPS			
Amount (\$) \$49.00		Payee address City: State: Zip Code 7310 Manchaca RD Austin, TX 78745			
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"/> Postage <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/23/2014		Payee name USPS			
Amount (\$) \$49.00		Payee address City: State: Zip Code 7310 Manchaca RD Austin, TX 78745			
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"/> Postage <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/24/2014		Payee name USPS			
Amount (\$) \$58.00		Payee address City: State: Zip Code 7310 Manchaca RD Austin, TX 78745			
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"/> Postage <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
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: 59/59		2 FILER NAME Kitchen, Ann		3 ACCOUNT # (TEC filers) 00000001
4 Date 07/31/2014	5 Payee name Worley Printing			
6 Amount (\$) \$4,350.57	7 Payee address City: State: Zip Code 3217 N Interstate 35 Frontage Rd Austin, TX 78722			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postcards	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:

**FEC
FORM 1**
**STATEMENT OF
ORGANIZATION**

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

ADDRESS (number and street) 1625 L Street NW
(Check if address is changed) Washington DC 20036
CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)
jtaggart@afscme.org

(Check if address is changed)

COMMITTEE'S WEB PAGE ADDRESS (URL)
NONE

(Check if address is changed)

2. DATE 06 22 2012

3. FEC IDENTIFICATION NUMBER C C00011114

4. IS THIS STATEMENT NEW (N) OR X AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer LAURA M. REYES

Signature of Treasurer LAURA M. REYES

Date 06 22 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office
Use
Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 02/2009)

5. TYPE OF COMMITTEE

Candidate Committee:

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of
Candidate

Candidate
Party Affiliation

Office
Sought:

House

Senate

President

State

District

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of
Candidate

Party Committee:

- (d) This committee is a _____ (National, State or subordinate) committee of the _____ (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) ☒ This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:

Corporation

Corporation w/o Capital Stock

☒

Labor Organization

Membership Organization

Trade Association

Cooperative

☒

In addition, this committee is a Lobbyist/Registrant PAC.

- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)

In addition, this committee is a Lobbyist/Registrant PAC.

In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

- | | | |
|----|-------|-----------------|
| 1. | _____ | FEC ID number C |
| 2. | _____ | FEC ID number C |
| 3. | _____ | FEC ID number C |
| 4. | _____ | FEC ID number C |

Write or Type Committee Name

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES

Mailing Address 1625 L Street NW
Washington DC 20036
CITY STATE ZIP CODE

Relationship: ☒ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name CHARLES JURGONIS
Mailing Address 1625 L Street NW
Washington DC 20036
CITY STATE ZIP CODE
Title or Position
DIRECTOR Telephone number 202 429 1007

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer LAURA M. REYES
Mailing Address 1625 L Street NW
Washington DC 20036
CITY STATE ZIP CODE
Title or Position
SECRETARY-TREASURER Telephone number 202 429 1200

Full Name of
Designated
Agent

Mailing Address

CITY

STATE

ZIP CODE

Title or Position

Telephone number

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

AMALGAMATED BANK

Mailing Address

275 7th Avenue

New York

NY

10001

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

BANK OF AMERICA

Mailing Address

730 15th Street NW

Washington

DC

20005

CITY

STATE

ZIP CODE

FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

FEC Form 1S (Revised 06/2011)

Page 5

Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

[ADDITIONAL]

Mailing Address

CITY

STATE

ZIP CODE

[ADDITIONAL]

Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (DC37PEOPLE)

Mailing Address

125 Barclay Street

New York

NY

10007

CITY

STATE

ZIP CODE

Relationship:

☐

Connected Organization

☒

Affiliated Committee

☐

Joint Fundraising Representative

☐

Leadership PAC Sponsor

Designated Agent

[ADDITIONAL]

Full Name

Mailing Address

Title or Position

CITY

STATE

ZIP CODE

Telephone number

Joint Fundraiser Participant

[ADDITIONAL]

FEC ID number

C