

FORM COR-C/OH

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

| | | | | | | | | | | | | | | |
|---|--|---|-------------------------------------|---------------------------------|--|---|---|--|---|---|--|--|---------------------------------------|--|
| 1 ACCOUNT # 00005000 | 2 PAGE # 1 of 78 | | | | | | | | | | | | | |
| 3 CANDIDATE/ OFFICEHOLDER NAME | MS / MRS / MR FIRST MI Ms. Kathrynne NICKNAME LAST SUFFIX Kathie Tovo | OFFICE USE ONLY Date Received <div style="text-align: center; font-size: 2em;">2014 OCT 27 PM 2:25</div> Date Hand-delivered or Date Postmarked Receipt # Legal Date Processed Date Imaged | | | | | | | | | | | | |
| 4 ORIGINAL REPORT TYPE | <table style="width: 100%;"> <tr> <td><input type="checkbox"/> January 15</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> Other (specify)</td> </tr> <tr> <td><input checked="" type="checkbox"/> July 15</td> <td><input type="checkbox"/> Exceeded \$500 limit</td> <td></td> </tr> <tr> <td><input type="checkbox"/> 30th day before election</td> <td colspan="2"><input type="checkbox"/> 15th day after treasurer appointment (officeholder only)</td> </tr> <tr> <td><input type="checkbox"/> 8th day before election</td> <td colspan="2"><input type="checkbox"/> Final Report</td> </tr> </table> | | <input type="checkbox"/> January 15 | <input type="checkbox"/> Runoff | <input type="checkbox"/> Other (specify) | <input checked="" type="checkbox"/> July 15 | <input type="checkbox"/> Exceeded \$500 limit | | <input type="checkbox"/> 30th day before election | <input type="checkbox"/> 15th day after treasurer appointment (officeholder only) | | <input type="checkbox"/> 8th day before election | <input type="checkbox"/> Final Report | |
| <input type="checkbox"/> January 15 | <input type="checkbox"/> Runoff | <input type="checkbox"/> Other (specify) | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> July 15 | <input type="checkbox"/> Exceeded \$500 limit | | | | | | | | | | | | | |
| <input type="checkbox"/> 30th day before election | <input type="checkbox"/> 15th day after treasurer appointment (officeholder only) | | | | | | | | | | | | | |
| <input type="checkbox"/> 8th day before election | <input type="checkbox"/> Final Report | | | | | | | | | | | | | |
| 5 ORIGINAL PERIOD COVERED | <table style="width: 100%;"> <tr> <td>Month Day Year</td> <td>Month Day Year</td> </tr> <tr> <td>01/01/2014</td> <td>06/30/2014</td> </tr> </table> | | Month Day Year | Month Day Year | 01/01/2014 | 06/30/2014 | | | | | | | | |
| Month Day Year | Month Day Year | | | | | | | | | | | | | |
| 01/01/2014 | 06/30/2014 | | | | | | | | | | | | | |

6 EXPLANATION OF CORRECTION

The employer and occupation for one donor was inadvertently left off of the original report. This report includes that information. The box for an out-of-state PAC on Schedule A was not marked so this is corrected in this report and the required information regarding that out-of-state PAC is included.

7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

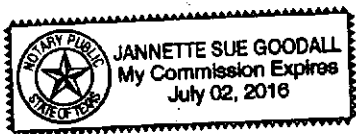
Check ONLY if applicable:



Semiannual reports: This report is an amendment/correction to a semi-annual report due on or after September 1, 2011. If amendment/correction is filed on or after the eighth day after the original report was filed, I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.



Other reports (excluding semiannual reports): I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.



Kathrynne Tovo

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me by Kathrynne Tovo this the 27 day of OCT, 20 14,
to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

**Remember To Attach Any Part Of The Campaign Finance Report Form
Needed To Report And Explain Corrections**

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT #
(Ethics Commission filers)
00005000

2 PAGE #
2 of 78

**3 CANDIDATE /
OFFICEHOLDER
NAME**

 MS / MRS / MR FIRST MI
 Ms. Kathrynne
 NICKNAME LAST SUFFIX
 Kathie Tovo
OFFICE USE ONLY

Date Received

Date Hand-delivered or Date Postmarked

Receipt #

Amount

**4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS**

 ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
 809 W 32nd Street
 Austin, TX 78705

☐ Change of Address

**5 CAMPAIGN
TREASURER
NAME**

 MS / MRS / MR FIRST MI
 Mr. Joseph
 NICKNAME LAST SUFFIX
 Pinnelli

Date Processed

Date Imaged

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

 STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
 P.O. Box 50038
 Austin, TX 78763

**7 CAMPAIGN
TREASURER
PHONE**

 AREA CODE PHONE NUMBER EXTENSION
 (512) 478-5958
8 REPORT TYPE
☐ 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
 01/01/2014 THROUGH 06/30/2014
10 ELECTION
 ELECTION DATE
 Month Day Year
 11/04/2014

ELECTION TYPE

☐ Primary ☐ Runoff ☒ General ☐ Special
11 OFFICE
 OFFICE HELD (if any)
 City Council Place 3
12 OFFICE SOUGHT (if known)

City Council District 9

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

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

14 ACCOUNT # (Ethics Commission filers)
0000500015 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)

\$

41,332.00

EXPENDITURE
TOTALS

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

\$

0.00

4. TOTAL POLITICAL EXPENDITURES

\$

35,696.88

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

\$

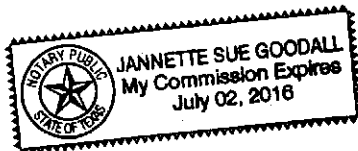
30,796.64

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

\$

76,807.06

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.

Kathrynne Tovo

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Kathrynne TOVO, this the 27 day
of OCT, 2014, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Print name of officer administering oath

Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 1/51 Report: 4/78

2 FILER NAME Tovo, Kathryn (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/30/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Akers, Larry (Mr.)

6 Contributor address; City; State; Zip Code
2311 Ridgeview
Austin, TX 78704

7 Amount of
contribution (\$)

\$20.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

06/01/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Anderson, Jamie (Ms.)

Contributor address; City; State; Zip Code
1213 West 12th
Austin, TX 78703

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Retail Owner

Employer (See Instructions)
Anderson's Coffee Company

Date

06/26/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Anschutz, Kent (Mr.)

Contributor address; City; State; Zip Code
1006 Reagan Terrace
Austin, TX 78704

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Self-Employed

Date

05/26/2014

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

Contributor address; City; State; Zip Code
911 Daniel Dr.
Austin, TX 78704

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/30/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ausley, Robbie (Mr.)

Contributor address; City; State; Zip Code
3707 Laurel Ledge Ln.
Austin, TX 78731

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
N/A

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

| | | | |
|--|---|--|--|
| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 2/51 Report: 5/78 | |
| 2 FILER NAME Tovo, Kathrynne (Ms.) | | 3 ACCOUNT # (Ethics Commission filers) 00005000 | |
| 4 Date 06/15/2014 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Badgett, Becky (Ms.) 6 Contributor address; City; State; Zip Code 2107 Alameda Austin, TX 78704 | 7 Amount of contribution (\$) \$25.00 | 8 In-kind contribution description (if applicable) |
| | | (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> | |
| 9 Principal occupation / Job title (See Instructions) | | 10 Employer (See Instructions) | |
| Date 06/29/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Baer, Therese (Ms.) Contributor address; City; State; Zip Code 7756 Northcross Dr. Austin, TX 78757 | Amount of contribution (\$) \$350.00 | In-kind contribution description (if applicable) |
| | | (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> | |
| Principal occupation / Job title (See Instructions) Professional Engineer | | Employer (See Instructions) Baer Engineering & Environmental Consulting, Inc. | |
| Date 06/30/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bailey, Donna (Ms.) Contributor address; City; State; Zip Code 2003 Forest Trail Austin, TX 78703 | Amount of contribution (\$) \$200.00 | In-kind contribution description (if applicable) |
| | | (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) N/A | |
| Date 06/03/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bailey, Kris (Mr.) Contributor address; City; State; Zip Code 8418 Spring Valley Dr Austin, TX 78736 | Amount of contribution (\$) \$200.00 | In-kind contribution description (if applicable) |
| | | (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> | |
| Principal occupation / Job title (See Instructions) Insurance Adjuster | | Employer (See Instructions) Self-Employed | |
| Date 06/28/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Balaka, Gerald (Mr.) Contributor address; City; State; Zip Code 1800 W 34th St Austin, TX 78703 | Amount of contribution (\$) \$50.00 | In-kind contribution description (if applicable) |
| | | (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 3/51 Report: 6/78

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/27/2014

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

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

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

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

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

10 Employer (See Instructions)
Self-Employed

Date

06/03/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Basciano, Joyce (Ms.)

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

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/03/2014

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

Contributor address; City; State; Zip Code
8522 Woodstone Dr.
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)
Taxi Driver

Employer (See Instructions)
Self-Employed

Date

06/26/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Biedrzycki, Carol (Ms.)

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

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/04/2014

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

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

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 4/51 Report: 7/78

2 FILER NAME Tovo, Kathryn (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/03/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Blythe, Sharon (Ms.)6 Contributor address; City; State; Zip Code
9206 Brigadoon Cove
Austin, TX 787507 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

06/21/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Breier Day, Barbara (Ms.)Contributor address; City; State; Zip Code
710 Colorado
#3H
Austin, TX 78701Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/18/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Bridges, Barbara (Ms.)Contributor address; City; State; Zip Code
1106 W 22 1/2 St
Austin, TX 78705Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/27/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Brotherton, Kathryn (Ms.)Contributor address; City; State; Zip Code
1108 Woodland Ave.
Austin, TX 78704Amount of
contribution (\$)

\$12.50

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/27/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Brotherton, Richard (Mr.)Contributor address; City; State; Zip Code
1108 Woodland Ave.
Austin, TX 78704Amount of
contribution (\$)

\$12.50

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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

1 PAGE #

Schedule: 5/51 Report: 8/78

2 FILER NAME Tovo, Kathryn (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/26/2014

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

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

7 Amount of contribution (\$)

\$100.00

8 In-kind contribution description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

06/03/2014

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

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

Amount of contribution (\$)

\$200.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Save Our Springs Alliance

Date

06/17/2014

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

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

Amount of contribution (\$)

\$350.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)
Real Estate

Employer (See Instructions)
Self-Employed

Date

06/17/2014

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

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

Amount of contribution (\$)

\$350.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)
Homemaker

Employer (See Instructions)
N/A

Date

06/03/2014

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

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

Amount of contribution (\$)

\$200.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)
Architect

Employer (See Instructions)
Self-Employed

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 6/51 Report: 9/78

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/06/2014

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

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

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
Attorney

10 Employer (See Instructions)
Self-Employed

Date

06/30/2014

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

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

Amount of
contribution (\$)

\$150.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/27/2014

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

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

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/30/2014

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

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

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/03/2014

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

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

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 7/51 Report: 10/78

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/29/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Carpenter, Sue (Ms.)

6 Contributor address; City; State; Zip Code
3028 Sunland
Austin, TX 78748

7 Amount of
contribution (\$)

\$25.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

06/25/2014

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

Contributor address; City; State; Zip Code
605 W Johanna St.
Austin, TX 78704

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Executive Director

Employer (See Instructions)
Dell Inc.

Date

05/24/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Chimenti, Danette (Ms.)

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

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Computer Consultant

Employer (See Instructions)
Self-Employed

Date

06/30/2014

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

Contributor address; City; State; Zip Code
1520 Windsor Rd.
Austin, TX 78703

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
N/A

Date

06/03/2014

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

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

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Homemaker

Employer (See Instructions)
N/A

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 8/51 Report: 11/78

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/28/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Clinton, Ryan (Mr.)

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

7 Amount of
contribution (\$)

\$100.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

06/28/2014

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

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

Amount of
contribution (\$)

\$26.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/30/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Coldwell, Matt (Mr.)

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

Amount of
contribution (\$)

\$101.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/30/2014

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

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

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/03/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Crossley, Cecilia (Ms.)

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

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 9/51 Report: 12/78

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/30/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Crow, Lindsey (Ms.)

6 Contributor address; City; State; Zip Code
3018 West Avenue
Austin, TX 78705

7 Amount of
contribution (\$)

\$200.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
Nurse

10 Employer (See Instructions)
Seton

Date

06/03/2014

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

Contributor address; City; State; Zip Code
211 E 7th St Suite 920
Austin, TX 78701

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Mediator

Employer (See Instructions)
Self-employed

Date

06/29/2014

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

Contributor address; City; State; Zip Code
700 Lavaca
Suite 1400
Austin, TX 78701

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Mediator

Employer (See Instructions)
Self-employed

Date

06/29/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Daniel, Harold (Mr.)

Contributor address; City; State; Zip Code
3203 Cupid Dr.
Austin, TX 78735

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Client Support Engineer

Employer (See Instructions)
Academic Works

Date

06/30/2014

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

Contributor address; City; State; Zip Code
2609 Sherwood Ln
Austin, TX 78704

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 10/51 Report: 13/78

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/29/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Dawes, Janet (Ms.)

6 Contributor address; City; State; Zip Code
7013 Priscilla Dr.
Austin, TX 78752

7 Amount of
contribution (\$)

\$25.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

06/29/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Deaderick, Suzanne (Ms.)

Contributor address; City; State; Zip Code
2502 Harris Blvd.
Austin, TX 78703

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/03/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
deYoung, Claire (Ms.)

Contributor address; City; State; Zip Code
4612 Red River
Austin, TX 78751

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

N/A

Date

06/10/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Dittmar, Ronald (Mr.)

Contributor address; City; State; Zip Code
904 Ebony
Austin, TX 78704

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/29/2014

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

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

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

N/A

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

| | | | |
|---|---|--|--|
| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 11/51 Report: 14/78 | |
| 2 FILER NAME Tovo, Kathryn (Ms.) | | 3 ACCOUNT # (Ethics Commission filers) 00005000 | |
| 4 Date 06/20/2014 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Downer, Jane (Ms.) 6 Contributor address; City; State; Zip Code 517 East Mary Austin, TX 78704 | 7 Amount of contribution (\$) \$150.00 | 8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| 9 Principal occupation / Job title (See Instructions) | | 10 Employer (See Instructions) | |
| Date 06/30/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Duncan, James (Mr.) Contributor address; City; State; Zip Code 11405 Pradera Dr Austin, TX 78759 | 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) City Planner | | Employer (See Instructions) Duncan Associates | |
| Date 06/30/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Duncan, Katy (Ms.) Contributor address; City; State; Zip Code 11405 Pradera Dr Austin, TX 78759 | 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) Homemaker | | Employer (See Instructions) N/A | |
| Date 06/19/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Easterday, Sammy (Ms.) Contributor address; City; State; Zip Code 1702 Shelbourne Dr Austin, TX 78752 | Amount of contribution (\$) \$5.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 06/04/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ellison, Christopher (Mr.) Contributor address; City; State; Zip Code 2500 Flora Cove Austin, TX 78746 | Amount of contribution (\$) \$350.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) Professor | | Employer (See Instructions) UT San Antonio | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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

1 PAGE #

Schedule: 12/51 Report: 15/78

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/30/2014

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

6 Contributor address; City; State; Zip Code
5308 Raincreek Pkwy
Austin, TX 78759

7 Amount of contribution (\$)

\$350.00

8 In-kind contribution description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
Retired

10 Employer (See Instructions)
N/A

Date

06/30/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Fantl, Nina (Ms.)

Contributor address; City; State; Zip Code
601 S. 3rd
Austin, TX 78704

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/21/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ferguson, Frances (Ms.)

Contributor address; City; State; Zip Code
1013 Harwood Place
Austin, TX 78704

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/03/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ferrell, Marjorie (Ms.)

Contributor address; City; State; Zip Code
6407 Emerald St
Austin, TX 78745

Amount of contribution (\$)

\$50.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/29/2014

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

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

Amount of contribution (\$)

\$50.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 13/51 Report: 16/78

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/29/2014

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

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

7 Amount of
contribution (\$)

\$50.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

06/30/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Flores, Maria (Ms.)

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

Amount of
contribution (\$)

\$150.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/06/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Fraser, Russell (Mr.)

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

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/29/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Fraser, Russell (Mr.)

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

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/06/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Fraser, Sally (Mrs.)

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

Amount of
contribution (\$)

\$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: 14/51 Report: 17/78

2 FILER NAME Tovo, Kathryn (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/26/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Fraser, Sally (Mrs.)

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

7 Amount of
contribution (\$)

\$50.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

06/04/2014

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

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

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/21/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Gibbs, Carol (Ms.)

Contributor address; City; State; Zip Code
1602 Roberts Ave
Austin, TX 78704

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Neighborhood Advisor

Employer (See Instructions)
City of Austin

Date

06/27/2014

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

Contributor address; City; State; Zip Code
1701 S. 6th
Austin, TX 78704

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/30/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Gibbs, Joan (Ms.)

Contributor address; City; State; Zip Code
4209 Ave G
Austin, TX 78751

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 15/51 Report: 18/78

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/03/2014

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

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

7 Amount of
contribution (\$)

\$50.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

06/30/2014

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

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

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/12/2014

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

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

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)
Bookkeeper

Employer (See Instructions)
Self

Date

06/28/2014

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

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

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/24/2014

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

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

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 16/51 Report: 19/78

2 FILER NAME Tovo, Kathryn (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00005000

4 Date

06/18/2014

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

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

7 Amount of
contribution (\$)

\$50.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

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

05/26/2014

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

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

06/19/2014

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

Amount of
contribution (\$)

\$150.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

06/30/2014

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

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

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

Employer (See Instructions)
Texas Disposal Systems

Date

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

06/30/2014

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

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Homemaker

Employer (See Instructions)
N/A

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 17/51 Report: 20/78

2 FILER NAME Tovo, Kathryn (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/26/2014

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

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

7 Amount of
contribution (\$)

\$50.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

06/13/2014

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

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

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/03/2014

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

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

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/29/2014

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

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

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/21/2014

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

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

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 18/51 Report: 21/78

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/30/2014

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

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

7 Amount of contribution (\$)

\$100.00

8 In-kind contribution description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

06/30/2014

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

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

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/30/2014

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

Contributor address; City; State; Zip Code
1901 West 35th St
Austin, TX 78703

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/30/2014

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

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

Amount of contribution (\$)

\$25.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/03/2014

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

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

Amount of contribution (\$)

\$300.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)
Title Examiner

Employer (See Instructions)
Gracy Title

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 19/51 Report: 22/78

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/30/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Heinen, Anne (Ms.)

6 Contributor address; City; State; Zip Code
3010 Washington Sq.
Austin, TX 78705

7 Amount of
contribution (\$)

\$50.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

06/30/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Heinen, Dirk (Mr.)

Contributor address; City; State; Zip Code
3010 Washington Sq.
Austin, TX 78705

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/30/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Heinzen, Dan (Mr.)

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

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Physics Professor

Employer (See Instructions)
University of Texas at Austin

Date

06/19/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Hendler, Scott (Mr.)

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

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
HendlerLaw

Date

06/30/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Holland, Leon (Mr.)

Contributor address; City; State; Zip Code
10705 Leafwood Ln
Austin, TX 78750

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

(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: 20/51 Report: 23/78

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/29/2014

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

6 Contributor address; City; State; Zip Code
1503 Inglewood
Austin, TX 78741

7 Amount of
contribution (\$)

\$50.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

05/15/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Hurt, Jan (Mrs.)

Contributor address; City; State; Zip Code
P.O. Box 1927
Abingdon, VA 24212

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Artist

Employer (See Instructions)
Self-Employed

Date

06/03/2014

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

Contributor address; City; State; Zip Code
4510 Avenue F
Austin, TX 78751

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Store Owner

Employer (See Instructions)
Accentric

Date

06/29/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Hurt, Jun (Mrs.)

Contributor address; City; State; Zip Code
1209 Newning
Austin, TX 78704

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Administrative Associate

Employer (See Instructions)
University of Texas at Austin

Date

05/15/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Hurt, Sam F. (Mr.)

Contributor address; City; State; Zip Code
P.O. Box 1927
Abingdon, VA 24212

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Self-Employed

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

| | | | |
|--|---|--|--|
| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 21/51 Report: 24/78 | |
| 2 FILER NAME Tovo, Kathrynne (Ms.) | | 3 ACCOUNT # (Ethics Commission filers) 00005000 | |
| 4 Date 06/29/2014 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hurt, Tom (Mr.) 6 Contributor address; City; State; Zip Code 809 W 32nd Austin, TX 78705 | 7 Amount of contribution (\$) \$350.00 | 8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| 9 Principal occupation / Job title (See Instructions) Architect | | 10 Employer (See Instructions) Self-Employed | |
| Date 06/28/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hurt III, Sam (Mr.) Contributor address; City; State; Zip Code 1209 Newning Austin, TX 78704 | Amount of contribution (\$) \$350.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) Artist | | Employer (See Instructions) Self-Employed | |
| Date 06/03/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Iverson, Nancy (Mrs.) Contributor address; City; State; Zip Code 506 West 34th Austin, TX 78705 | Amount of contribution (\$) \$200.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) N/A | |
| Date 06/03/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Iverson, Richard (Mr.) Contributor address; City; State; Zip Code 506 West 34th Austin, TX 78705 | Amount of contribution (\$) \$200.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) N/A | |
| Date 06/03/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jack, Jeff (Mr.) Contributor address; City; State; Zip Code 2008 B Rabb Glen Austin, TX 78704 | Amount of contribution (\$) \$350.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) Architect | | Employer (See Instructions) Self-Employed | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 22/51 Report: 25/78

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/26/2014

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

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

7 Amount of contribution (\$)

\$150.00

8 In-kind contribution description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

06/30/2014

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

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

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/17/2014

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

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

Amount of contribution (\$)

\$125.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/03/2014

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

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

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/03/2014

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

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

Amount of contribution (\$)

\$15.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 23/51 Report: 26/78

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/03/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Justice, David (Mr.)6 Contributor address; City; State; Zip Code
2408 Tom Miller St
Austin, TX 787237 Amount of
contribution (\$)

\$50.00

8 In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

06/03/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Justice, Shirlene (Mrs.)Contributor address; City; State; Zip Code
2408 Tom Miller St
Austin, TX 78723Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/03/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Kallendorf Spear, Carol (Ms.)Contributor address; City; State; Zip Code
1704 Briar St
Austin, TX 78704Amount of
contribution (\$)

\$75.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/03/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Keil, Philip (Mr.)Contributor address; City; State; Zip Code
912 Christopher Street
Austin, TX 78704Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
ArchitectEmployer (See Instructions)
Furman & Keil Architects

Date

06/30/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Kennedy, Sara (Ms.)Contributor address; City; State; Zip Code
4105 Avenue B
Austin, TX 78751Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
RetiredEmployer (See Instructions)
N/A

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 24/51 Report: 27/78

2 FILER NAME Tovo, Kathryn (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/03/2014

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

6 Contributor address; City; State; Zip Code
5702 Wynona Ave
Austin, TX 78756

7 Amount of
contribution (\$)

\$25.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

06/03/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
King, Bryan (Mr.)

Contributor address; City; State; Zip Code
1809 Lightsey Rd.
Austin, TX 78704

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Broadcasting

Employer (See Instructions)
Self-Employed

Date

06/27/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
King, Bryan (Mr.)

Contributor address; City; State; Zip Code
1809 Lightsey Rd.
Austin, TX 78704

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Broadcasting

Employer (See Instructions)
Self-Employed

Date

06/03/2014

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

Contributor address; City; State; Zip Code
1808 Kerr St
Austin, TX 78704

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/03/2014

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

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

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 25/51 Report: 28/78

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/30/2014

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

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

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

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

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

10 Employer (See Instructions)
Self-Employed

Date

06/30/2014

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

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

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/28/2014

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

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

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
N/A

Date

06/28/2014

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

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

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/02/2014

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

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

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 26/51 Report: 29/78

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/12/2014

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

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

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
Bookkeeper

10 Employer (See Instructions)
Self-Employed

Date

06/30/2014

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

Contributor address; City; State; Zip Code
12349 Metric Blvd
Apt 1612
Austin, TX 78758

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/03/2014

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

Contributor address; City; State; Zip Code
11900 Stonehollow Dr
#1412
Austin, TX 78758

Amount of
contribution (\$)

\$40.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/30/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Lee, Carol (Ms.)

Contributor address; City; State; Zip Code
3506 Far View Dr.
Austin, TX 78730

Amount of
contribution (\$)

\$110.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/30/2014

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

Contributor address; City; State; Zip Code
1002 Bouldin Ave.
Austin, TX 78704

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: 27/51 Report: 30/78 | |
| 2 FILER NAME Tovo, Kathrynne (Ms.) | | 3 ACCOUNT # (Ethics Commission filers) 00005000 | |
| 4 Date 06/03/2014 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ley, Bill (Mr.) 6 Contributor address; City; State; Zip Code 404 West Monroe Austin, TX 78704 | 7 Amount of contribution (\$) \$250.00 | 8 In-kind contribution description (if applicable) |
| | | (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> | |
| 9 Principal occupation / Job title (See Instructions) Realtor/Lawyer | | 10 Employer (See Instructions) Black Sheep Realty | |
| Date 06/03/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ley, Mary (Mrs.) Contributor address; City; State; Zip Code 404 West Monroe Austin, TX 78704 | Amount of contribution (\$) \$250.00 | In-kind contribution description (if applicable) |
| | | (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) N/A | |
| Date 06/27/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ley, Mary (Mrs.) Contributor address; City; State; Zip Code 404 West Monroe Austin, TX 78704 | Amount of contribution (\$) \$100.00 | In-kind contribution description (if applicable) |
| | | (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) N/A | |
| Date 06/13/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Limon, John (Mr.) Contributor address; City; State; Zip Code 908 Calle Limon Austin, TX 78702 | Amount of contribution (\$) \$25.00 | In-kind contribution description (if applicable) |
| | | (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 06/29/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Linder, Nelson (Mr.) Contributor address; City; State; Zip Code 1807 Rhodes Rd Apt 2 Austin, TX 78721 | Amount of contribution (\$) \$25.00 | In-kind contribution description (if applicable) |
| | | (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: 28/51 Report: 31/78

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/30/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Lipchak, Oscar (Mr.)

6 Contributor address; City; State; Zip Code
2511 Del Curto Rd.
Austin, TX 78704

7 Amount of
contribution (\$)

\$50.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

06/30/2014

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

Contributor address; City; State; Zip Code
205 Park Ln
Austin, TX 78704

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Physician

Employer (See Instructions)
Self-Employed

Date

06/28/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Lowe, Claudette (Ms.)

Contributor address; City; State; Zip Code
400 Academy Dr.
Austin, TX 78704

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Officer/Director

Employer (See Instructions)
CLW Inc.

Date

06/28/2014

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

Contributor address; City; State; Zip Code
400 Academy Dr.
Austin, TX 78704

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
General Counsel

Employer (See Instructions)
CLW Inc.

Date

06/29/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Lowry, Janice (Ms.)

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

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

(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: 29/51 Report: 32/78

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/03/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Lupa, Paul (Mr.)

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

7 Amount of
contribution (\$)

\$50.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

06/28/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
MacNeillage, Linda (Mrs.)

Contributor address; City; State; Zip Code
606 Harthan St
Austin, TX 78703

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/28/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
MacNeillage, Peter (Mr.)

Contributor address; City; State; Zip Code
606 Harthan St
Austin, TX 78703

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/30/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Martin, Carol (Mrs.)

Contributor address; City; State; Zip Code
1901 Travis Heights Blvd
Austin, TX 78704

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

N/A

Date

06/30/2014

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

Contributor address; City; State; Zip Code
1214 Newning Ave.
Austin, TX 78704

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 30/51 Report: 33/78

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/03/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Martinez, Narda (Ms.)

6 Contributor address; City; State; Zip Code
4510 Avenue F
Austin, TX 78751

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

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

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

10 Employer (See Instructions)
Avenue Gallery

Date

06/02/2014

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

Contributor address; City; State; Zip Code
1611 Alameda Dr.
Austin, TX 78704

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
N/A

Date

06/03/2014

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

Contributor address; City; State; Zip Code
4308 Avenue F
Austin, TX 78751

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/03/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Maxwell, Mary Gay (Ms.)

Contributor address; City; State; Zip Code
111 Laurel Ln
Austin, TX 78705

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
McCann, Jana (Ms.)

Contributor address; City; State; Zip Code
4000 Pinckney St
Austin, TX 78723

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(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: 31/51 Report: 34/78

2 FILER NAME Tovo, Kathryn (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

05/27/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
McCarver, Bo (Mr.)

6 Contributor address; City; State; Zip Code
1719 Manor Rd
Austin, TX 78722

7 Amount of contribution (\$)

\$350.00

8 In-kind contribution description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
Social Anthropologist

10 Employer (See Instructions)
Self-Employed

Date

06/03/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
McCormick, Donna Beth (Ms.)

Contributor address; City; State; Zip Code
5703 Shoalwood Ave.
Austin, TX 78756

Amount of contribution (\$)

\$25.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/29/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
McDaniel, Marc (Mr.)

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

Amount of contribution (\$)

\$350.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)
Air Pollution Chemist

Employer (See Instructions)
Self-Employed

Date

06/03/2014

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

Contributor address; City; State; Zip Code
4315 Avenue C
Austin, TX 78751

Amount of contribution (\$)

\$50.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/29/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Meadows, Donna (Ms.)

Contributor address; City; State; Zip Code
631 Amesbury Ln.
Austin, TX 78752

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

(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: 32/51 Report: 35/78

2 FILER NAME Tovo, Kathryn (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/03/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Meisenbach, Albert (Mr.)

6 Contributor address; City; State; Zip Code
1800 San Gabriel St.
Austin, TX 78701

7 Amount of contribution (\$)

\$250.00

8 In-kind contribution description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
Retired

10 Employer (See Instructions)
N/A

Date

06/03/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Meisenbach, Megan (Mrs.)

Contributor address; City; State; Zip Code
1800 San Gabriel St.
Austin, TX 78701

Amount of contribution (\$)

\$250.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)
Musician

Employer (See Instructions)
Self-Employed

Date

06/14/2014

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

Contributor address; City; State; Zip Code
908 W Monroe
Austin, TX 78704

Amount of contribution (\$)

\$50.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/03/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Miller, Stacy (Ms.)

Contributor address; City; State; Zip Code
912 Christopher
Austin, TX 78704

Amount of contribution (\$)

\$250.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)
Administrator

Employer (See Instructions)
University of Texas Austin

Date

06/30/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mishra, Mandy (Ms.)

Contributor address; City; State; Zip Code
3200 West Avenue
Austin, TX 78705

Amount of contribution (\$)

\$250.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)
Advanced Practice Nurse

Employer (See Instructions)
Austin Regional Clinic

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

| | | | |
|--|---|--|--|
| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 33/51 Report: 36/78 | |
| 2 FILER NAME Tovo, Kathrynne (Ms.) | | 3 ACCOUNT # (Ethics Commission filers) 00005000 | |
| 4 Date 06/06/2014 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mitchell, Sybil (Ms.) 6 Contributor address; City; State; Zip Code 2105 Pat Booker Rd Universal City, TX 78148 | 7 Amount of contribution (\$) \$150.00 | 8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| 9 Principal occupation / Job title (See Instructions) | | 10 Employer (See Instructions) | |
| Date 06/30/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moore, Catherine (Ms.) Contributor address; City; State; Zip Code 3802 Avenue H Austin, TX 78751 | Amount of contribution (\$) \$350.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) N/A | |
| Date 06/30/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moore, John Paul (Mr.) Contributor address; City; State; Zip Code 3802 Avenue H Austin, TX 78751 | Amount of contribution (\$) \$350.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) N/A | |
| Date 06/17/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moriarty, William (Mr.) Contributor address; City; State; Zip Code 1004 Jousting Place Austin, TX 78746 | Amount of contribution (\$) \$350.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) Vice President/Environmental Engineer | | Employer (See Instructions) King Engineering | |
| Date 06/15/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morrison, Phil (Mr.) Contributor address; City; State; Zip Code 610 Baylor St Austin, TX 78703 | Amount of contribution (\$) \$350.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) Professor | | Employer (See Instructions) University of Texas | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 34/51 Report: 37/78

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/03/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Morrison, Susan (Ms.)

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

7 Amount of
contribution (\$)

\$50.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

06/27/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Morrow, Donna (Ms.)

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

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/30/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Nazor, Craig (Mr.)

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

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/27/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Newsom, Len (Mr.)

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

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/27/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Newsom, Sara (Mrs.)

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

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: 35/51 Report: 38/78

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/03/2014

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

6 Contributor address; City; State; Zip Code
2728 S. Congress
#12
Austin, TX 78704

7 Amount of
contribution (\$)

\$25.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

06/13/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Owens, Phyllis (Ms.)

Contributor address; City; State; Zip Code
1709 Saint Albans Blvd
Austin, TX 78745

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/19/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Palaima, Carolyn (Ms.)

Contributor address; City; State; Zip Code
505 E. 40th St
Austin, TX 78751

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/29/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Penn, Beverly (Ms.)

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

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Professor

Employer (See Instructions)
Texas State University

Date

06/30/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Perkins, Jerry (Mr.)

Contributor address; City; State; Zip Code
4128 Lawless St.
Austin, TX 78723

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
N/A

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 36/51 Report: 39/78

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

05/27/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Pinnelli, Janis (Mrs.)

6 Contributor address; City; State; Zip Code
2001 Exposition
Austin, TX 78703

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
Accountant

10 Employer (See Instructions)
J. Pinnelli Company, LLC

Date

05/27/2014

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

Contributor address; City; State; Zip Code
2001 Exposition
Austin, TX 78703

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
General Contractor

Employer (See Instructions)
J. Pinnelli Company, LLC

Date

06/30/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Pohlman, Joyce (Ms.)

Contributor address; City; State; Zip Code
611 Fletcher St.
Austin, TX 78704

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/30/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Powell, Greg (Mr.)

Contributor address; City; State; Zip Code
1300 Abbey Rd
Round Rock, TX 78681

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/05/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Radjef, Eric (Mr.)

Contributor address; City; State; Zip Code
2311 S. 2nd St
Austin, TX 78704

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Geologist

Employer (See Instructions)
Statoil

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

| | | | |
|--|---|---|--|
| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 37/51 Report: 40/78 | |
| 2 FILER NAME Tovo, Kathrynne (Ms.) | | 3 ACCOUNT # (Ethics Commission filers) 00005000 | |
| 4 Date 06/30/2014 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ratliff, Gay (Ms.) 6 Contributor address; City; State; Zip Code 3509 Hampton Rd. Austin, TX 78705 | 7 Amount of contribution (\$) \$350.00 | 8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| 9 Principal occupation / Job title (See Instructions) Interior Design | | 10 Employer (See Instructions) Gay Ratliff Interiors | |
| Date 06/30/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Renaud, Lynn (Ms.) Contributor address; City; State; Zip Code 1708 Exposition Blvd Austin, TX 78703 | Amount of contribution (\$) \$50.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 06/29/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reynolds, Caroline (Mrs.) Contributor address; City; State; Zip Code 2611 W 49th St Austin, TX 78731 | Amount of contribution (\$) \$350.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) Engineer | | Employer (See Instructions) CR Solutions | |
| Date 06/29/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reynolds, Joseph (Mr.) Contributor address; City; State; Zip Code 2611 W 49th St Austin, TX 78731 | Amount of contribution (\$) \$350.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) N/A | |
| Date 06/17/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rice, Kathleen (Ms.) Contributor address; City; State; Zip Code 14109 Marks Place Fort Worth, TX 76116 | Amount of contribution (\$) \$15.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 38/51 Report: 41/78

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/25/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Rips, Geoff (Mr.)

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

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

06/29/2014

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

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

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/29/2014

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

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

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/30/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Rodenko, Susan (Ms.)

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

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/26/2014

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

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

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

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

Employer (See Instructions)
Rodgers & Reichle, Inc.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

| | | | |
|--|---|--|--|
| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 39/51 Report: 42/78 | |
| 2 FILER NAME Tovo, Kathryn (Ms.) | | 3 ACCOUNT # (Ethics Commission filers) 00005000 | |
| 4 Date 06/27/2014 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rodgers, James (Mr.) 6 Contributor address; City; State; Zip Code 1610 Alta Vista Austin, TX 78704 | 7 Amount of contribution (\$) \$125.00 | 8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| 9 Principal occupation / Job title (See Instructions) | | 10 Employer (See Instructions) | |
| Date 06/27/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rodgers, Julie (Mrs.) Contributor address; City; State; Zip Code 1610 Alta Vista Austin, TX 78704 | Amount of contribution (\$) \$125.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 06/28/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rohlich, Mary (Ms.) Contributor address; City; State; Zip Code 2101 Pecos St Austin, TX 78703 | Amount of contribution (\$) \$100.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 05/26/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Romanczak, Marlene (Ms.) Contributor address; City; State; Zip Code 11 Niles Rd. Austin, TX 78703 | Amount of contribution (\$) \$350.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) Homemaker | | Employer (See Instructions) N/A | |
| Date 06/03/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Russell, Tom (Mr.) Contributor address; City; State; Zip Code 1610 Little Raven St Denver, CO 80202 | Amount of contribution (\$) \$100.00 | In-kind contribution description (if applicable) (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: 40/51 Report: 43/78

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/03/2014

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

6 Contributor address; City; State; Zip Code
4308 Avenue F
Austin, TX 78751

7 Amount of
contribution (\$)

\$50.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

06/27/2014

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

Contributor address; City; State; Zip Code
2608 West 49th Street
Austin, TX 78731

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/04/2014

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

Contributor address; City; State; Zip Code
2500 Flora Cove
Austin, TX 78746

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
N/A

Date

05/26/2014

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

Contributor address; City; State; Zip Code
704 Carolyn Ave.
Austin, TX 78705

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
N/A

Date

06/30/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Satija, Ranjan (Mr.)

Contributor address; City; State; Zip Code
1316 Madison Avenue
Austin, TX 78757

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Trustee

Employer (See Instructions)
The Satija Law Firm PC

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 41/51 Report: 44/78

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/30/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Scallon, Susan (Ms.)

6 Contributor address; City; State; Zip Code
13504 Overland Pass
Bee Cave, TX 78738

7 Amount of contribution (\$)

\$50.00

8 In-kind contribution description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

06/30/2014

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

Contributor address; City; State; Zip Code
2313 S. 2nd
Austin, TX 78704

Amount of contribution (\$)

\$25.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/30/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Scott, Barbara (Ms.)

Contributor address; City; State; Zip Code
6705 Hillcroft Dr.
Austin, TX 78724

Amount of contribution (\$)

\$25.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/30/2014

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

Contributor address; City; State; Zip Code
805 W. 16th St
Austin, TX 78701

Amount of contribution (\$)

\$350.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)
National Sales Branch Manager

Employer (See Instructions)
Sprint

Date

06/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Seeger, Patricia (Ms.)

Contributor address; City; State; Zip Code
6705 Winterberry Dr.
Austin, TX 78750

Amount of contribution (\$)

\$350.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
N/A

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 42/51 Report: 45/78

2 FILER NAME Tovo, Kathryn (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/19/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Seidel, Diana (Ms.)

6 Contributor address; City; State; Zip Code
709 Fletcher St
Austin, TX 78704

7 Amount of
contribution (\$)

\$50.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

06/29/2014

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

Contributor address; City; State; Zip Code
2422 Western Trails Blvd
#126
Austin, TX 78745

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/17/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Silberman, Susan (Ms.)

Contributor address; City; State; Zip Code
8808 Taylor Rd.
Austin, TX 78733

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Psychologist

Employer (See Instructions)
Self-Employed

Date

06/09/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Sittler, Wolf (Mr.)

Contributor address; City; State; Zip Code
1403 Kenwood Ave
Austin, TX 78704

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/30/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Soliz III, Florencio (Mr.)

Contributor address; City; State; Zip Code
315 Appleton Court
Buda, TX 78610

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

(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: 43/51 Report: 46/78 | |
| 2 FILER NAME Tovo, Kathrynne (Ms.) | | 3 ACCOUNT # (Ethics Commission filers) 00005000 | |
| 4 Date 06/30/2014 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sorenson-Hyatt, Kristie (Ms.) 6 Contributor address; City; State; Zip Code 1804 Eva St Austin, TX 78704 | 7 Amount of contribution (\$) \$250.00 | 8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| 9 Principal occupation / Job title (See Instructions) Real Estate Broker | | 10 Employer (See Instructions) Eva Street Properties | |
| Date 06/02/2014 | Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID# _____) Southwest Laborers District Council SWLDC PAC Contributor address; City; State; Zip Code 11720 East 21st Suite D Tulsa, OK 74129 | Amount of contribution (\$) \$350.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 06/03/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Speer, Jack (Mr.) Contributor address; City; State; Zip Code 1704 Briar St Austin, TX 78704 | Amount of contribution (\$) \$75.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 06/28/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Spitz, Robert (Mr.) Contributor address; City; State; Zip Code 3211 E. Cesar Chavez Austin, TX 78702 | Amount of contribution (\$) \$350.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) Veterinarian | | Employer (See Instructions) Lake Austin Blvd. Animal Hospital | |
| Date 06/03/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stevens, Jean (Ms.) Contributor address; City; State; Zip Code 1619 W 14th St Austin, TX 78703 | Amount of contribution (\$) \$350.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) N/A | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 44/51 Report: 47/78

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/03/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Stevens, Steve (Mr.)

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

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
Contractor

10 Employer (See Instructions)
Self-Employed

Date

06/05/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Strange, Becky (Ms.)

Contributor address; City; State; Zip Code
717 Post Oak
Austin, TX 78704

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/05/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Strange, John Paul (Mr.)

Contributor address; City; State; Zip Code
717 Post Oak
Austin, TX 78704

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/30/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Sullivan, Susan (Ms.)

Contributor address; City; State; Zip Code
P.O. Box 623
Austin, TX 78767

Amount of
contribution (\$)

\$65.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/24/2014

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

Contributor address; City; State; Zip Code
1001 West 17th St.
Austin, TX 78701

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: 45/51 Report: 48/78

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/03/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Tevis, Terry (Ms.)

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

7 Amount of
contribution (\$)

\$100.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

05/28/2014

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

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

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)
Voter File Access

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/30/2014

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

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

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/28/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Thomson, Phyllis (Ms.)

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

Amount of
contribution (\$)

\$60.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/03/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Timberlake, Walter (Mr.)

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

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: 46/51 Report: 49/78

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/30/2014

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

6 Contributor address; City; State; Zip Code
P.O. Box 300038
Austin, TX 78703

7 Amount of
contribution (\$)

\$50.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

06/26/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Todd, Connie (Ms.)

Contributor address; City; State; Zip Code
1403 S. Congress Ave.
Austin, TX 78704

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
N/A

Date

06/03/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Tollett, Blake (Mr.)

Contributor address; City; State; Zip Code
3701 Bonnie Rd
Austin, TX 78703

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Self-Employed

Date

06/19/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Trejo, Deborah (Ms.)

Contributor address; City; State; Zip Code
1717 Briar St
Austin, TX 78704

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Kemp Smith LLP

Date

06/29/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Tucker, Larry (Mr.)

Contributor address; City; State; Zip Code
2210 White Dove Pass
Austin, TX 78734

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Consultant

Employer (See Instructions)
LIM Digital

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 47/51 Report: 50/78

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/30/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Tucker, Pam (Ms.)

6 Contributor address; City; State; Zip Code
3303 Snead Path
Round Rock, TX 78664

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
CEO

10 Employer (See Instructions)
Utility Composites

Date

05/27/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Turner, Kay (Ms.)

Contributor address; City; State; Zip Code
198 Roebling St
Apt 5B
Brooklyn, NY 11211

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
N/A

Date

06/30/2014

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

Contributor address; City; State; Zip Code
1811 West 38th St
Austin, TX 78731

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/29/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Volz, Candace (Ms.)

Contributor address; City; State; Zip Code
1406 Preston Ave.
Austin, TX 78703

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/03/2014

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

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

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Marketing Communications

Employer (See Instructions)
Emerson

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

| | | | |
|--|--|--|--|
| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 48/51 Report: 51/78 | |
| 2 FILER NAME Tovo, Kathrynne (Ms.) | | 3 ACCOUNT # (Ethics Commission filers) 00005000 | |
| 4 Date 06/27/2014 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Webre, Michele (Ms.) 6 Contributor address; City; State; Zip Code 511 Lockhart Dr. Austin, TX 78704 | 7 Amount of contribution (\$) \$100.00 | 8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| 9 Principal occupation / Job title (See Instructions) | | 10 Employer (See Instructions) | |
| Date 06/03/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Weed, Betty (Ms.) Contributor address; City; State; Zip Code 2218 Alta Vista Ave. Austin, TX 78704 | Amount of contribution (\$) \$100.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 06/23/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Weeks, Joelyn (Ms.) Contributor address; City; State; Zip Code 6805 Moonmont Austin, TX 78745 | Amount of contribution (\$) \$100.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 06/29/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Weigand, Ingrid (Ms.) Contributor address; City; State; Zip Code 704 W Gibson Austin, TX 78704 | Amount of contribution (\$) \$350.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) N/A | |
| Date 06/03/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wendler, Ed (Mr.) Contributor address; City; State; Zip Code 4803 Balcones Dr. Austin, TX 78731 | Amount of contribution (\$) \$200.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) Real Estate | | Employer (See Instructions) Self-Employed | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 49/51 Report: 52/78

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/27/2014

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

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

7 Amount of
contribution (\$)

\$100.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

05/24/2014

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

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

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/30/2014

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

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

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/30/2014

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

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

Amount of
contribution (\$)

\$150.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/03/2014

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

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

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 50/51 Report: 53/78

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/17/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Williams, Jonathan (Mr.)

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

7 Amount of
contribution (\$)

\$125.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

06/03/2014

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

Contributor address; City; State; Zip Code
4803 Avenue H
Austin, TX 78751

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/29/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Witte, Tracy (Ms.)

Contributor address; City; State; Zip Code
908 E. 14th Street
Austin, TX 78702

Amount of
contribution (\$)

\$150.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/25/2014

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

Contributor address; City; State; Zip Code
3211 Funston St
Austin, TX 78703

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/30/2014

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

Contributor address; City; State; Zip Code
3211 Funston St
Austin, TX 78703

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

(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: 51/51 Report: 54/78

2 FILER NAME Tovo, Kathrynne (Ms.)**3** ACCOUNT # (Ethics Commission filers)

00005000

4 Date

06/30/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Yeatts, Malcolm (Mr.)**6** Contributor address; City; State; Zip Code
4811 Allison Cove
Austin, TX 78741**7** Amount of
contribution (\$)

\$100.00

8 In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐**9** Principal occupation / Job title (See Instructions)**10** Employer (See Instructions)

Date

06/30/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Zaragoza, Nuria (Ms.)Contributor address; City; State; Zip Code
1908 Cliff St
Austin, TX 78705Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
Social WorkerEmployer (See Instructions)
Self-Employed

Date

06/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Zent, Shelley (Ms.)Contributor address; City; State; Zip Code
5507 Lemonwood Dr.
Austin, TX 78731Amount 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)

LOANS**SCHEDULE E**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 1/1 Report: 55/78

2 FILER NAME Tovo, Kathrynne (Ms.)**3** ACCOUNT # (Ethics Commission filers)

00005000

4

TOTAL OF UNITEMIZED LOANS:

⇒⇒⇒⇒⇒⇒

\$

5 Date of loan

05/08/2014

7 Name of lender

Tovo, Kathrynne (Ms.)

☐ out-of-state PAC (ID# _____)**9** Loan Amount (\$)

\$15,000.00

6 Is lender a
financial institution?

No

8 Lender address; City; State; Zip Code809 W 32nd Street
Austin, TX 78705**10** Interest rate

N/A

11 Maturity date**12** Principal occupation / Job title (See Instructions)**13** Employer (See Instructions)**14** Description of Collateral☒ none**15** Check if personal funds were deposited into political account☒**16** GUARANTOR
INFORMATION☒ 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: 56/78 | | 2 FILER NAME Tovo, Kathrynne (Ms.) | | 3 ACCOUNT # (TEC filers) 00005000 | |
| 4 Date 05/27/2014 | 5 Payee name Breed & Co., Inc. | | | | |
| 6 Amount (\$) \$30.31 | 7 Payee address City; State; Zip Code 718 West 29th Street Austin, TX 78705 | | | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Office Keys | | |
| | <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 06/04/2014 | Payee name Butts, David (Mr.) | | | | |
| Amount (\$) \$800.00 | Payee address City; State; Zip Code 1914 Patton Ln Austin, TX 78723 | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Consulting Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political Consulting | | |
| | <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 06/23/2014 | Payee name Capital Area Democratic Women | | | | |
| Amount (\$) \$125.00 | Payee address City; State; Zip Code P.O. Box 685008 Austin, TX 78768 | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event Sponsorship | | |
| | <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 06/16/2014 | Payee name Capitol Courier | | | | |
| Amount (\$) \$13.50 | Payee address City; State; Zip Code P.O. Box 3182 Austin, TX 78764 | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Courier Services | | |
| | <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: 57/78 | | 2 FILER NAME Tovo, Kathrynne (Ms.) | | 3 ACCOUNT # (TEC filers) 00005000 | |
| 4 Date 05/30/2014 | 5 Payee name Clarkie Hall Farmers Inc. | | | | |
| 6 Amount (\$) \$839.28 | 7 Payee address City; State; Zip Code 5818 Balcones Dr. Austin, TX 78731 | | | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Office Insurance | | |
| | <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 06/16/2014 | Payee name Costco | | | | |
| Amount (\$) \$243.75 | Payee address City; State; Zip Code 10401 Research Blvd. Austin, TX 78759 | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Advertising Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage | | |
| | <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 06/25/2014 | Payee name Costco | | | | |
| Amount (\$) \$205.81 | Payee address City; State; Zip Code 10401 Research Blvd. Austin, TX 78759 | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Advertising Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage | | |
| | <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 05/30/2014 | Payee name CVS/pharmacy | | | | |
| Amount (\$) \$31.15 | Payee address City; State; Zip Code 2301 S. Congress Ave Austin, TX 78704 | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Office Supplies | | |
| | <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: 58/78 | | 2 FILER NAME Tovo, Kathrynne (Ms.) | | 3 ACCOUNT # (TEC filers) 00005000 | |
| 4 Date 06/03/2014 | | 5 Payee name David Thomas Photography | | | |
| 6 Amount (\$) \$200.00 | | 7 Payee address City: State: Zip Code 2004 B East 9th Street Austin, TX 78702 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Photography Services <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 05/30/2014 | | Payee name De Los Santos, Drew (Ms.) | | | |
| Amount (\$) \$1,250.00 | | Payee address City: State: Zip Code 2601 Parker Ln Unit A Austin, TX 78701 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary for campaign services <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 06/16/2014 | | Payee name De Los Santos, Drew (Ms.) | | | |
| Amount (\$) \$1,250.00 | | Payee address City: State: Zip Code 2601 Parker Ln Unit A Austin, TX 78741 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary for campaign services <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 06/16/2014 | | Payee name De Mayo Cellular | | | |
| Amount (\$) \$83.00 | | Payee address City: State: Zip Code 8716 Research Blvd Ste 220 Austin, TX 78758 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Office Cell Phones <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: 59/78 | | 2 FILER NAME Tovo, Kathrynne (Ms.) | | 3 ACCOUNT # (TEC filers) 00005000 | |
| 4 Date 05/23/2014 | 5 Payee name El Mercado | | | | |
| 6 Amount (\$) \$108.25 | 7 Payee address City; State; Zip Code 1302 South First Street Austin, TX 78704 | | | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Launch Party - Deposit | | |
| | <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 06/03/2014 | Payee name El Mercado | | | | |
| Amount (\$) \$529.66 | Payee address City; State; Zip Code 1302 South First Street Austin, TX 78704 | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Event Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Launch Party | | |
| | <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 06/02/2014 | Payee name Facebook, Inc. | | | | |
| Amount (\$) \$9.00 | Payee address City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025 | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Advertising Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political Advertising | | |
| | <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 06/30/2014 | Payee name Facebook, Inc. | | | | |
| Amount (\$) \$11.36 | Payee address City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025 | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Advertising Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political Advertising | | |
| | <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: 60/78 | | 2 FILER NAME Tovo, Kathrynne (Ms.) | | 3 ACCOUNT # (TEC filers) 00005000 | |
| 4 Date 05/23/2014 | | 5 Payee name Fagan, Dennis (Mr.) | | | |
| 6 Amount (\$) \$806.60 | | 7 Payee address City: State: Zip Code 1601 West 38th Street #202 Austin, TX 78731 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Photography Services <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 05/27/2014 | | Payee name FedEx Office | | | |
| Amount (\$) \$67.15 | | Payee address City: State: Zip Code 600 E. Ben White Blvd Austin, TX 78704 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Printing Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Invitation 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: | |
| Date 05/27/2014 | | Payee name FedEx Office | | | |
| Amount (\$) \$1.74 | | Payee address City: State: Zip Code 600 E. Ben White Blvd Austin, TX 78704 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Cutting Services <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 05/31/2014 | | Payee name FedEx Office | | | |
| Amount (\$) \$20.55 | | Payee address City: State: Zip Code 600 E. Ben White Blvd Austin, TX 78704 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Printing Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Invitation 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: 6/13 Report: 61/78 | | 2 FILER NAME Tovo, Kathrynne (Ms.) | | 3 ACCOUNT # (TEC filers) 00005000 | |
| 4 Date 06/20/2014 | 5 Payee name FedEx Office | | | | |
| 6 Amount (\$) \$1.61 | 7 Payee address City: State: Zip Code 600 E. Ben White Blvd Austin, TX 78704 | | | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Cutting services | | |
| | <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 06/20/2014 | Payee name FedEx Office | | | | |
| Amount (\$) \$35.88 | Payee address City: State: Zip Code 600 E. Ben White Blvd Austin, TX 78704 | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Printing Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Flyer Printing | | |
| | <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 05/23/2014 | Payee name Griffith Descendants, LLC | | | | |
| Amount (\$) \$5,560.00 | Payee address City: State: Zip Code 3536 Bee Caves Rd #310 Austin, TX 78746 | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Office Deposit and Rent | | |
| | <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 06/03/2014 | Payee name Harland Clarke Corporation | | | | |
| Amount (\$) \$34.75 | Payee address City: State: Zip Code 10931 Laureate Drive Austin, TX 78249 | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Accounting/Banking | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign check fees | | |
| | <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: 62/78 | | 2 FILER NAME Tovo, Kathrynne (Ms.) | | 3 ACCOUNT # (TEC filers) 00005000 | |
| 4 Date 05/14/2014 | | 5 Payee name Hughes, William (Mr.) | | | |
| 6 Amount (\$) \$1,650.00 | | 7 Payee address City: State: Zip Code 1009 Hillside Oaks Dr. Austin, TX 78745 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary for campaign services <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 05/30/2014 | | Payee name Hughes, William (Mr.) | | | |
| Amount (\$) \$1,650.00 | | Payee address City: State: Zip Code 1009 Hillside Oaks Dr. Austin, TX 78745 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary for campaign services <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 06/16/2014 | | Payee name Hughes, William (Mr.) | | | |
| Amount (\$) \$1,665.00 | | Payee address City: State: Zip Code 1009 Hillside Oaks Dr. Austin, TX 78745 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary for campaign services <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 06/16/2014 | | Payee name Kelly Graphics | | | |
| Amount (\$) \$593.53 | | Payee address City: State: Zip Code 1409 Quaker Ridge Austin, TX 78746 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Printing Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Bumper Stickers <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: 63/78 | | 2 FILER NAME Tovo, Kathryn (Ms.) | | 3 ACCOUNT # (TEC filers) 00005000 | |
| 4 Date 05/27/2014 | | 5 Payee name Kinney, Nathan (Mr.) | | | |
| 6 Amount (\$) \$50.00 | | 7 Payee address City: State: Zip Code 1700 Lavaca St Austin, TX 78701 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Event Expense | | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> PA/Audio Equipment Rental <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 05/12/2014 | | Payee name Kiolbassa, Jolene (Ms.) | | | |
| Amount (\$) \$995.00 | | Payee address City: State: Zip Code 3007 West Ave Austin, TX 78705 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor for campaign services <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 06/16/2014 | | Payee name Kiolbassa, Jolene (Ms.) | | | |
| Amount (\$) \$1,250.00 | | Payee address City: State: Zip Code 3007 West Ave Austin, TX 78705 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary for campaign services <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 06/03/2014 | | Payee name Miscellaneous Rentals | | | |
| Amount (\$) \$38.97 | | Payee address City: State: Zip Code 1901 E 51st Street Bldg 1 Austin, TX 78723 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Event Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Furniture Rental <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: 64/78 | | 2 FILER NAME Tovo, Kathrynne (Ms.) | | 3 ACCOUNT # (TEC filers) 00005000 | |
| 4 Date 05/25/2014 | | 5 Payee name Net Victories | | | |
| 6 Amount (\$) \$34.80 | | 7 Payee address City: State: Zip Code 4203 Montrose Blvd Suite 350 Houston, TX 77006 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Automated Marketing <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 05/28/2014 | | Payee name Net Victories | | | |
| Amount (\$) \$1,333.25 | | Payee address City: State: Zip Code 4203 Montrose Blvd Suite 350 Houston, TX 77006 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Website Build <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 05/31/2014 | | Payee name Net Victories | | | |
| Amount (\$) \$24.00 | | Payee address City: State: Zip Code 4203 Montrose Blvd Suite 350 Houston, TX 77006 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Advertising Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Automated Marketing <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 06/25/2014 | | Payee name Net Victories | | | |
| Amount (\$) \$58.80 | | Payee address City: State: Zip Code 4203 Montrose Blvd Suite 350 Houston, TX 77006 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Advertising Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Email Services <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: 65/78 | | 2 FILER NAME Tovo, Kathrynne (Ms.) | | 3 ACCOUNT # (TEC filers) 00005000 | |
| 4 Date 05/13/2014 | | 5 Payee name Office Max | | | |
| 6 Amount (\$) \$1.25 | | 7 Payee address City: State: Zip Code 907 West Fifth Street Austin, TX 78703 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Cutting Services <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 05/13/2014 | | Payee name Office Max | | | |
| Amount (\$) \$3.25 | | Payee address City: State: Zip Code 907 West Fifth Street Austin, TX 78703 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Printing Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Flyer Printing <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 06/03/2014 | | Payee name Office Max | | | |
| Amount (\$) \$75.89 | | Payee address City: State: Zip Code 4615 North Lamar Blvd Austin, TX 78756 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Office Supplies <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 06/24/2014 | | Payee name Office Max | | | |
| Amount (\$) \$19.80 | | Payee address City: State: Zip Code 4615 North Lamar Blvd Austin, TX 78756 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Office Supplies <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: 66/78 | | 2 FILER NAME Tovo, Kathryn (Ms.) | | 3 ACCOUNT # (TEC filers) 00005000 | |
| 4 Date 06/24/2014 | | 5 Payee name Office Max | | | |
| 6 Amount (\$) \$67.92 | | 7 Payee address City: State: Zip Code 4615 North Lamar Blvd Austin, TX 78756 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Office Supplies <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 06/30/2014 | | Payee name Pirya, Inc. | | | |
| Amount (\$) \$1,137.86 | | Payee address City: State: Zip Code 144 2nd St. 1st floor San Francisco, CA 94105 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Fees | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Cumulative donation processing fees for reporting period <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 06/16/2014 | | Payee name Scholz Garten | | | |
| Amount (\$) \$487.13 | | Payee address City: State: Zip Code 1607 San Jacinto Blvd Austin, TX 78701 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Event Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Watch Party Room Reservation <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 05/27/2014 | | Payee name Texas Democratic Party | | | |
| Amount (\$) \$550.00 | | Payee address City: State: Zip Code 4818 E. Ben White Blvd. Ste. 104 Austin, TX 78741 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Advertising Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> License for online voter file database <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: 67/78 | | 2 FILER NAME Tovo, Kathrynne (Ms.) | | 3 ACCOUNT # (TEC filers) 00005000 | |
| 4 Date 06/20/2014 | 5 Payee name Texas Made Productions | | | | |
| 6 Amount (\$) \$350.00 | 7 Payee address City: State: Zip Code 3707 Manchaca #177 Austin, TX 78704 | | | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Video Services | | |
| | <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 06/25/2014 | Payee name Thompson & Knight LLP | | | | |
| Amount (\$) \$425.00 | Payee address City: State: Zip Code 98 San Jacinto Blvd Ste 1900 Austin, TX 78701 | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Legal Services | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Legal fees for campaign | | |
| | <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 06/17/2014 | Payee name Thundercloud Subs | | | | |
| Amount (\$) \$143.47 | Payee address City: State: Zip Code 3200 Guadalupe Austin, TX 78705 | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Sponsor Lunch for Kirk Watson Campaign Academy | | |
| | <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 05/14/2014 | Payee name Travis County Democratic Party | | | | |
| Amount (\$) \$50.00 | Payee address City: State: Zip Code 1311 E 6th St Austin, TX 78702 | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Fees | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Staff Training | | |
| | <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: 68/78 | | 2 FILER NAME Tovo, Kathrynne (Ms.) | | 3 ACCOUNT # (TEC filers) 00005000 | |
| 4 Date 06/20/2014 | 5 Payee name Walmart | | | | |
| 6 Amount (\$) \$45.84 | 7 Payee address City; State; Zip Code 710 Ben White Blvd Austin, TX 78704 | | | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Candy for Juneteenth Parade | | |
| | <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 06/16/2014 | Payee name Worley Printing Co, Inc. | | | | |
| Amount (\$) \$226.25 | Payee address City; State; Zip Code 3217 North IH 35 Austin, TX 78722 | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Printing Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Rally signs, Lapel stickers | | |
| | <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 MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

| | | | | |
|--|--|--|---|---|
| 1 PAGE # Schedule: 1/9 Report: 69/78 | | 2 FILER NAME Tovo, Kathrynne (Ms.) | | 3 ACCOUNT # (TEC filers) 00005000 |
| 4 Date 04/14/2014 | 5 Payee name Annie's List | | | |
| 6 Amount (\$) \$150.00 <input type="checkbox"/> Reimbursement from political contributions intended | 7 Payee address City: State: Zip Code P.O. Box 699 Austin, TX 78767 | | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event Ticket <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Date 06/18/2014 | Payee name Austin Environmental Democrats | | | |
| Amount (\$) \$10.00 <input type="checkbox"/> Reimbursement from political contributions intended | Payee address City: State: Zip Code 604 W. 11th St. Austin, TX 78701 | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Fees | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Membership Dues <input type="checkbox"/> Check If Austin, TX, officeholder living expense | |
| Date 01/09/2014 | Payee name Black Austin Democrats | | | |
| Amount (\$) \$500.00 <input type="checkbox"/> Reimbursement from political contributions intended | Payee address City: State: Zip Code P.O. Box 212 Austin, TX 78767 | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event Sponsorship <input type="checkbox"/> Check If Austin, TX, officeholder living expense | |
| Date 04/30/2014 | Payee name Bruce Elfant for Tax Assessor-Collector | | | |
| Amount (\$) \$110.00 <input type="checkbox"/> Reimbursement from political contributions intended | Payee address City: State: Zip Code P.O. Box 49051 Austin, TX 78765 | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event Sponsorship <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

| | | | | | |
|--|--|--|---|---|--|
| 1 PAGE # Schedule: 2/9 Report: 70/78 | | 2 FILER NAME Tovo, Kathryn (Ms.) | | 3 ACCOUNT # (TEC filers) 00005000 | |
| 4 Date 04/29/2014 | 5 Payee name Burnt Orange Report | | | | |
| 6 Amount (\$) \$100.00 <input type="checkbox"/> Reimbursement from political contributions intended | 7 Payee address City: State: Zip Code 908 E 5th St #114 Austin, TX 78702 | | | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event Sponsorship <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | |
| Date 04/30/2014 | Payee name Butts, David (Mr.) | | | | |
| Amount (\$) \$800.00 <input type="checkbox"/> Reimbursement from political contributions intended | Payee address City: State: Zip Code 1914 Patton Ln Austin, TX 78723 | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Consulting Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political consulting <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | |
| Date 02/03/2014 | Payee name Capital Area Asian American Democrats | | | | |
| Amount (\$) \$50.00 <input type="checkbox"/> Reimbursement from political contributions intended | Payee address City: State: Zip Code P.O. Box 300595 Austin, TX 78703 | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event Sponsorship <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | |
| Date 06/23/2014 | Payee name Capital Area Democratic Women | | | | |
| Amount (\$) \$125.00 <input type="checkbox"/> Reimbursement from political contributions intended | Payee address City: State: Zip Code P.O. Box 685008 Austin, TX 78768 | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event Sponsorship <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | |

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

| | | | | | |
|--|---|--|---|---|--|
| 1 PAGE # Schedule: 3/9 Report: 71/78 | | 2 FILER NAME Tovo, Kathrynne (Ms.) | | 3 ACCOUNT # (TEC filers) 00005000 | |
| 4 Date 04/11/2014 | 5 Payee name Capitol Rubber Stamp | | | | |
| 6 Amount (\$) \$34.10 <input type="checkbox"/> Reimbursement from political contributions intended | 7 Payee address City; State; Zip Code 3314 S. Congress Ave Austin, TX 78704 | | | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Name Badge | | |
| | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | | | |
| Date 04/11/2014 | Payee name Capitol Rubber Stamp | | | | |
| Amount (\$) \$22.73 <input type="checkbox"/> Reimbursement from political contributions intended | Payee address City; State; Zip Code 3314 S. Congress Ave Austin, TX 78704 | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Name Badge | | |
| | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | | | |
| Date 02/09/2014 | Payee name GoDaddy.com | | | | |
| Amount (\$) \$112.72 <input type="checkbox"/> Reimbursement from political contributions intended | Payee address City; State; Zip Code 14455 N Hayden Rd Suite 219 Scottsdale, AZ 85260 | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Fees | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Domain Renewal | | |
| | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | | | |
| Date 04/02/2014 | Payee name Hughes, William (Mr.) | | | | |
| Amount (\$) \$1,650.00 <input type="checkbox"/> Reimbursement from political contributions intended | Payee address City; State; Zip Code 1009 Hillside Oaks Dr. Austin, TX 78745 | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary for campaign services | | |
| | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | | | |

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

| | | | | | |
|--|--|--|--|--|--|
| 1 PAGE # Schedule: 4/9 Report: 72/78 | | 2 FILER NAME Tovo, Kathrynne (Ms.) | | 3 ACCOUNT # (TEC filers) 00005000 | |
| 4 Date 04/30/2014 | | 5 Payee name Hughes, William (Mr.) | | | |
| 6 Amount (\$) \$1,650.00 <input type="checkbox"/> Reimbursement from political contributions intended | | 7 Payee address City: State: Zip Code 1009 Hillside Oaks Dr. Austin, TX 78745 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary for campaign services <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Date 02/24/2014 | | Payee name Kiolbassa, Jolene (Ms.) | | | |
| Amount (\$) \$300.00 <input type="checkbox"/> Reimbursement from political contributions intended | | Payee address City: State: Zip Code 3007 West Ave Austin, TX 78705 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor for officeholder research <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Date 03/02/2014 | | Payee name Kiolbassa, Jolene (Ms.) | | | |
| Amount (\$) \$355.00 <input type="checkbox"/> Reimbursement from political contributions intended | | Payee address City: State: Zip Code 3007 West Ave Austin, TX 78705 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor for officeholder research <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Date 03/23/2014 | | Payee name Kiolbassa, Jolene (Ms.) | | | |
| Amount (\$) \$310.00 <input type="checkbox"/> Reimbursement from political contributions intended | | Payee address City: State: Zip Code 3007 West Ave Austin, TX 78705 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contact Labor for officeholder research <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

| | | | | | |
|--|--|--|--|--|--|
| 1 PAGE # Schedule: 5/9 Report: 73/78 | | 2 FILER NAME Tovo, Kathrynne (Ms.) | | 3 ACCOUNT # (TEC filers) 00005000 | |
| 4 Date 04/02/2014 | | 5 Payee name Kiolbassa, Jolene (Ms.) | | | |
| 6 Amount (\$) \$320.00 <input type="checkbox"/> Reimbursement from political contributions intended | | 7 Payee address City: State: Zip Code 3007 West Ave Austin, TX 78705 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor for officeholder research <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Date 04/10/2014 | | Payee name Kiolbassa, Jolene (Ms.) | | | |
| Amount (\$) \$400.00 <input type="checkbox"/> Reimbursement from political contributions intended | | Payee address City: State: Zip Code 3007 West Ave Austin, TX 78705 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor for campaign services <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Date 04/13/2014 | | Payee name Kiolbassa, Jolene (Ms.) | | | |
| Amount (\$) \$505.00 <input type="checkbox"/> Reimbursement from political contributions intended | | Payee address City: State: Zip Code 3007 West Ave Austin, TX 78705 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor for campaign services <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Date 04/28/2014 | | Payee name Kiolbassa, Jolene (Ms.) | | | |
| Amount (\$) \$730.50 <input type="checkbox"/> Reimbursement from political contributions intended | | Payee address City: State: Zip Code 3007 West Ave Austin, TX 78705 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor for campaign services <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

| | | | | | |
|--|--|--|--|---|--|
| 1 PAGE # Schedule: 6/9 Report: 74/78 | | 2 FILER NAME Tovo, Kathrynne (Ms.) | | 3 ACCOUNT # (TEC filers) 00005000 | |
| 4 Date 06/25/2014 | | 5 Payee name MacDaddy Service | | | |
| 6 Amount (\$) \$351.81 <input type="checkbox"/> Reimbursement from political contributions intended | | 7 Payee address City: State: Zip Code 7004 Chinook Dr Austin, TX 78736 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor for officeholder computer services <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Date 01/17/2014 | | Payee name Office Max | | | |
| Amount (\$) \$55.14 <input type="checkbox"/> Reimbursement from political contributions intended | | Payee address City: State: Zip Code 4615 North Lamar Blvd Austin, TX 78756 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Copy Services <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Date 03/03/2014 | | Payee name Office Max | | | |
| Amount (\$) \$63.33 <input type="checkbox"/> Reimbursement from political contributions intended | | Payee address City: State: Zip Code 4615 North Lamar Blvd Austin, TX 78756 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Copy Services <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Date 02/15/2014 | | Payee name OfficeMax | | | |
| Amount (\$) \$72.69 <input type="checkbox"/> Reimbursement from political contributions intended | | Payee address City: State: Zip Code 907 West Fifth St Austin, TX 78703 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Copy Services <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

| | | | | | |
|---|--|---|--|---|--|
| 1 PAGE # Schedule: 7/9 Report: 75/78 | | 2 FILER NAME Tovo, Kathrynne (Ms.) | | 3 ACCOUNT # (TEC filers) 00005000 | |
| 4 Date 01/28/2014 | | 5 Payee name Opinion Analysts, Inc | | | |
| 6 Amount (\$) \$25.00 <input type="checkbox"/> Reimbursement from political contributions intended | | 7 Payee address City; State; Zip Code 906 Rio Grande St Austin, TX 78701 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Fees | | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> District Information <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Date 02/24/2014 | | Payee name Thompson & Knight LLP | | | |
| Amount (\$) \$340.00 <input type="checkbox"/> Reimbursement from political contributions intended | | Payee address City; State; Zip Code 98 San Jacinto Blvd Ste 1900 Austin, TX 78701 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Legal Services | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Legal fees for officeholder matters <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Date 03/10/2014 | | Payee name Thompson & Knight LLP | | | |
| Amount (\$) \$170.00 <input type="checkbox"/> Reimbursement from political contributions intended | | Payee address City; State; Zip Code 98 San Jacinto Blvd Ste 1900 Austin, TX 78701 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Legal Services | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Legal fees for officeholder matters <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Date 04/01/2014 | | Payee name Thompson & Knight LLP | | | |
| Amount (\$) \$225.00 <input type="checkbox"/> Reimbursement from political contributions intended | | Payee address City; State; Zip Code 98 San Jacinto Blvd Ste 1900 Austin, TX 78701 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Legal Services | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Legal fees for officeholder matters <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

| | | | | | |
|--|--|--|---|---|--|
| 1 PAGE # Schedule: 8/9 Report: 76/78 | | 2 FILER NAME Tovo, Kathrynne (Ms.) | | 3 ACCOUNT # (TEC filers) 00005000 | |
| 4 Date 05/06/2014 | 5 Payee name Thompson & Knight LLP | | | | |
| 6 Amount (\$) \$170.00 <input type="checkbox"/> Reimbursement from political contributions intended | 7 Payee address City; State; Zip Code 98 San Jacinto Blvd Ste 1900 Austin, TX 78701 | | | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Legal Services | | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Legal fees for Campaign <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | |
| Date 06/25/2014 | Payee name Thompson & Knight LLP | | | | |
| Amount (\$) \$127.50 <input type="checkbox"/> Reimbursement from political contributions intended | Payee address City; State; Zip Code 98 San Jacinto Blvd Ste 1900 Austin, TX 78701 | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Legal Services | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Legal fees for officeholder matters <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | |
| Date 03/25/2014 | Payee name Travis County Democratic Party | | | | |
| Amount (\$) \$120.00 <input type="checkbox"/> Reimbursement from political contributions intended | Payee address City; State; Zip Code 1311 E 6th St Austin, TX 78702 | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political Donation <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | |
| Date 05/06/2014 | Payee name United States Postal Service - Central Park Station | | | | |
| Amount (\$) \$56.00 <input type="checkbox"/> Reimbursement from political contributions intended | Payee address City; State; Zip Code 3507 North Lamar Blvd Austin, TX 78705 | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Post Office Box rental <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | |

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

The INSTRUCTION GUIDE explains how to complete this form.

| | | |
|--|--|---|
| 1 PAGE # Schedule: 9/9 Report: 77/78 | 2 FILER NAME Tovo, Kathrynne (Ms.) | 3 ACCOUNT # (TEC filers) 00005000 |
|--|--|---|

| | |
|-----------------------------|--|
| 4 Date 03/17/2014 | 5 Payee name Wick, Jim (Mr.) |
|-----------------------------|--|

| | |
|--|---|
| 6 Amount (\$) \$500.00 <input type="checkbox"/> Reimbursement from political contributions intended | 7 Payee address City: State: Zip Code 2611 Ektom Drive Unit D Austin, TX 78745 |
|--|---|

| | | |
|---|---|---|
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political consulting |
| | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |

Information entered by filer as a memo

| | | |
|----------|-------------|--|
| Schedule | Cover Sheet | Information for out-of-state PAC donation from Southwest Laborers District Council SWLDC PAC: Address is 11720 East 21st Street, Ste D, Tulsa, Oklahoma 74129; Phone is 918-585-1799; Reno Hammond, Chairman - appointed Treasurer; Jeremy Hendricks, Treasurer - 1504 Rutland Drive Austin, TX 78758 (405) 833- 6462 |
|----------|-------------|--|