TDD 1-800-735-2989

FORM COR-C/OH

CORRECTION/AMENDMENT AFFIDAVIT

	FOR	CANDIDA	TE/OF	FICEH	OLDER	
ACCOUNT# 00	005000		PAGE#		1 of 56	
CANDIDATE/ . OFFICEHOLDER NAME	MS/MRS/MR MS.	FIRST Kathryne	. k	MI SUF	Date Received	E USE ONLY
4 ORIGINAL	Kathie January 15	Tovo Runoff		Other (specify)		
REPORT TYPE	July 15 30th day befor	e election 15th da	ded \$500 limit ay after treasurer tment (officeholds	er only)	Date Hand-delivered or	Date Postmarked
5 ORIGINAL	X 8th day before	election Final R	eport Month	Day Yea	Receipt #	Amount Totals
PERIOD COVERED					Date Processed	
	09/26/201	4 THROU	IGH 1	0/25/2014	Date lmaged	2015
7 AFFIDAVIT	· · · · · · · · · · · · · · · · · · ·		l swear, oi	affirm, under pue and correct.	penalty of perjury, that	5 PM 12 32 this corrected
Notary My	OMAS A. GRAUZER y Public, State of Te Commission Expire: ovember 19, 2018	xas 🖁	Semiannua annual repo is filed on o or affirm, th intent to mix Other repo filing this oc date I learn I swear, or	ort due on or after r after the eighth at the original rep slead or to misrer rts (excluding se irrected report no ed that the report	eport is an amendment/or September 1, 2011. If a day after the original rep port was made in good fa present the information or miannual reports): I swe t later than the 14th busi as originally filed is inactor for or omission in the rep	amendment/correction port was filed, I swear, with and without an contained in the report.
AFFIX NOTARY STAMP // Sworn to and subscribed to certify which, witness	d before me by	Eatherne To of office.	Kathryne	Signatu	re of Candidate or Officeholo 5th day of <u>Jeau</u>	
Signature of officer administering of		Printed name of officer ac			Title of officer administering oat	h
Remer		h Any Part Of d To Report A			nce Report For ons	m

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction Gui	DE explains how to complete this form.	1 ACCOUNT # (Ethics Commission filers) 00005000	2 PAGE # 2 of 56	
3 CANDIDATE /	MS/MRS/MR FIRST	мі	OFFICE USE ONLY	
OFFICEHOLDER NAME	Ms. Kathryne NICKNAME LAST Kathie Tovo	SUFFIX	Date Received	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; 809 W 32nd Street	CITY; STATE; ZIP CODE	Date Hand-delivered or Date Postmarked	
Change of Address	Austin, TX 78705			
5 04454101	MS/MRS/MR FIRST	MI	Receipt # Amount	
5 CAMPAIGN TREASURER	Mr. Joseph	МІ	Date Processed	
NAME	NICKNAME LAST Pinnelli	SUFFIX	Date Imaged	
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE): P.O. Box 50038 Austin, TX 78763	APT/SUITE#; CITY; STATE;	ZIP CÓDE	
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (512) 478-5958	EXTENSION		
8 REPORT TYPE	January 15 30th day bel	fore election Runoff	15th day after campaign treasurer appointment (officeholder only)	
	July 15 X 8th day before	ere election Exceeded \$500 limit	Final report (Attach C/OH - FR)	
9 PERIOD COVERED	Month Day Year	Month Day	Year	
	09/26/2014	THROUGH 10/25/20	114	
10 ELECTION	ELECTION DATE ELECTION DATE Month Day Year 11/04/2014	OTION TYPE Primary Runoff X	General Special	
11 OFFICE	OFFICE HELD (if any) City Council Place 3	12 OFFICE SOUGHT (if known City Council District		
GO TO PAGE 2				

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512)463-5800 TDD 1-800-735-2989 FORM C/OH CANDIDATE / OFFICEHOLDER REPORT: **SUPPORT & TOTALS** COVER SHEET PG 2 13 C/OH NAME Tovo, Kathryne (Ms.) 14 ACCOUNT # (Ethics Commission filers) 00005000 .. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may 15 NOTICE have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this **FROM** information only if they receive notice of such expenditures. .. **POLITICAL** COMMITTEE NAME COMMITTEE TYPE COMMITTEE(S) Austin Police Association PAC GENERAL COMMITTEE ADDRESS 5817 Wilcab Road Austin, TX 78721 SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME Escobar, Valencia (Ms.) additional pages COMMITTEE CAMPAIGN TREASURER ADDRESS Austin, TX 78721 **16 CONTRIBUTION** TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN 40.00 \$ PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED TOTALS TOTAL POLITICAL CONTRIBUTIONS 2 \$ 20,263.99 (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) **EXPENDITURE** TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$ TOTALS 0.00 TOTAL POLITICAL EXPENDITURES \$ 58,844.07 CONTRIBUTION TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE BALANCE 27,323.50 LAST DAY OF THE REPORTING PERIOD **OUTSTANDING** TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LOAN TOTALS \$ LAST DAY OF THE REPORTING PERIOD 141,807,46 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. Kathryne Tovo

AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said _ _, this the _ _, 20_____, 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

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 (512)463-5800 TDD 1-800-735-2989 FORM C/OH **CANDIDATE / OFFICEHOLDER REPORT: ADDENDUM NOTICE FROM POLITCAL COMMITTEE(S)** Page 4 of 56 Tovo, Kathryne (Ms.) ACCOUNT # (Ethics Commission filers) C/OH NAME 00005000 -- 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 17 NOTICE **FROM** information only if they receive notice of such expenditures. .. **POLITICAL** COMMITTEE(S) COMMITTEE NAME Sierra Club Political Committee of Texas COMMITTEE TYPE 615 Willow COMMITTEE ADDRESS X GENERAL San Antonio, TX 78202 COMMITTEE CAMPAIGN GONZAIEZ, Hector (Mr.) SPECIFIC 615 Willow COMMITTEE CAMPAIGN TREASURER ADDRESS San Antonio, TX 78202

	The Instruction	on Guide explains how to comp	olete this form.		1 PAGE# Schedule: 1/	35 Report: 5/56
2	FILER NAME	Tovo, Kathryne (Ms.)			3 ACCOUNT # 00005000	(Ethics Commission filers)
4	Date	5 Full name of contributor Abbott, Robin (Ms.)	☐ out-of-state PAC (ID#	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	10/17/2014	6 Contributor address; 5601 Blueridge Ct. Austin, TX 78731	City; State; Zip Code		\$50.00	! !
						f Texas, complete Schedule T)
9	Principal occup	eation / Job title (See Instructions	s)	10 Employer (See In	estructions)	· · · · · · · · · · · · · · · · · · ·
	Date	Full name of contributor Abdulle, Deika (Ms.)	☐ out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/19/2014	Contributor address; 4210 Red River #215 Austin, TX 78751	City; State; Zip Code		\$30.00	! ! !
					(If travel outside of	Texas, complete Schedule T)
	Principal occur	L	s)	Employer (See In	<u>'</u>	
	Date	Full name of contributor Arnold, Mary (Ms.)	☐ out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/01/2014	Contributor address; 3404 Southill Cir Austin, TX 78703	City; State; Zip Code		\$50.00	
					(If travel outside of	! Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instruction:	s)	Employer (See In	nstructions)	
	Date	Full name of contributor Arnold, Mary (Ms.)	☐ out-of-state PAC (ID#	<u>*)</u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/17/2014	Contributor address; 3404 Southill Cir Austin, TX 78703	City; State; Zip Code		\$50.00	
					,	f Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions	s)	Employer (See In	nstructions)	
	Date	Full name of contributor Austin Police Association F	,	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/26/2014	Contributor address; 5817 Wilcab Rd #4 Austin, TX 78721	City; State; Zip Code		\$350.00	
					(If travel outside of	f Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instruction	s)	Employer (See In		
_						

	The Instruction	GUIDE explains how to complete this	s form.		1 PAGE # Schedule: 2/3	35 Report: 6/56
2	FILER NAME	Tovo, Kathryne (Ms.)			3 ACCOUNT# 00005000	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out- Auten, Roseana (Ms.)	of-state PAC (ID#		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	10/23/2014	6 Contributor address; City; Si 400 Bowie St Austin, TX 78703	tate; Zip Code		\$350.00	[[
					(If travel outside of	Texas, complete Schedule T)
9	Principal occup Writer	ation / Job title (See Instructions)		10 Employer (See In: Self-employed	structions)	
	Date	Full name of contributor	of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/03/2014	Contributor address; City; Si 1801 West 10th St Austin, TX 78703	tate; Zip Code		\$100.00	
					(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)		Employer (See In	structions)	
	Date	Full name of contributor ut-	of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
.	10/16/2014	Contributor address; City; S 1801 West 10th St Austin, TX 78703	tate; Zip Code		\$25.00	
		Additi, 17 Tordo			(If travel outside of	! Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)		Employer (See In:	structions)	
	Date	Full name of contributor	of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/25/2014	Contributor address; City; S 4104 Turkey Creek Dr. Austin, TX 78730	tate; Zip Code		\$50.00	
ĺ _					(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)		Employer (See In:	structions)	
	Date	Full name of contributor	of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/22/2014	Contributor address; City; S 7452 Pusch Ridge Loop Austin, TX 78749	tate; Zip Code	,	\$50.00	
					(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)		Employer (See In	structions)	
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POLITICAL CONTRIBUTIONS SCHEDULE A

The bustrauction Guice explains how to complete this form. 1 PAGE # Schedule: 3/35 Report: 7/56 2 FILER NAME Tovo, Kathryne (Ms.) 3 ACCOUNT # (Efficis Commission Sters) 00005000 4 Date S Full name of contributor Out-of-state PAC (ID# Ontroduction (S) B Is-invited contribution (S) Discovery (See Instructions) Discovery (See Instructions) Discovery (See Instructions) Ontroduction (S) Discovery (See Instructions) Ontroduction (S) Ontroduction (S		OTHER THAN PLEDGES OR LOANS					
Date S Full name of contributor out-of-state PAC (ID#) 7 Amount of contribution (if applicable)		The Instruction	N GUIDE explains how to complete this form.			35 Report: 7/56	
Biedrzycki, Carol (Ms.) 10/15/2014 6 Contributor address; City: State; Zip Code \$25.00 \$25.00 \$25.00 9 Principal occupation / Job title (See Instructions) Date Full name of contributor Out-of-state PAC (ID# Ou	2	FILER NAME	Tovo, Kathryne (Ms.)			(Ethics Commission filers)	
1411 Gracy Farms Ln #23 (If travel outside of Texas, complete Schedule T) 9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions)	4	Date)			
Principal occupation / Job title (See Instructions) Date Date Bruil name of contributor out-of-state PAC (ID#		10/15/2014	1411 Gracy Farms Ln #23		\$25.00	 	
Date Full name of contributor out-of-state PAC (ID# Amount of contribution (S) In-kind contribution (description (if applicable)					(If travel outside of	Texas, complete Schedule T)	
Bonilla, Michelle (Ms.) Contributor address; 1905 West 37th St Austin, TX 78731 City; State; Zip Code \$50.00 (If travel outside of Texas, complete Schedule T)	9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In:	structions)	-	
1905 West 37th St Austin, TX 78731		Date	·)			
Principal occupation / Job title (See Instructions) Date		09/28/2014	1905 West 37th St		\$50.00	! 	
Date Full name of contributor out-of-state PAC (ID#					(If travel outside of	Texas, complete Schedule T)	
Bonilla, Raymond (Mr.) Contribution (\$) description (if applicable) Contribution (\$) description (if applicable) Contribution (\$) description (if applicable) S50.00 S50.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#		Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	· · · · · · · · · · · · · · · · · · ·	
1905 West 37th St Austin, TX 78731 (If travel outside of Texas, complete Schedule T)		Date	-)			
Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of contribution (\$) lin-kind contribution description (if applicable) 09/28/2014 Contributor address; City; State; Zip Code 212 West 33rd St Austin, TX 78705 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Employer (See Instructions) In-kind contribution contributor contributor description (if applicable) 10/25/2014 Contributor address; City: State; Zip Code 8150.00 10/25/2014 Contributor address; City: State; Zip Code 8150.00 (If travel outside of Texas, complete Schedule T) (If travel outside of Texas, complete Schedule T)		09/28/2014	1905 West 37th St		\$50.00	! ! ! 	
Date Full name of contributor out-of-state PAC (ID#		D 1 - 1 - 1		Employer (Cooks		Texas, complete Schedule T)	
Bowman, Andrew (Mr.) O9/28/2014		Principal occup	ation 7 Job title (See Instructions)	Employer (See In	structions)		
212 West 33rd St Austin, TX 78705 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Burkhardt, William (Mr.) Contributor address; City; State; Zip Code 802 Christopher St. Austin, TX 78704 (If travel outside of Texas, complete Schedule T)		Date	,	·)			
Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Burkhardt, William (Mr.) Contributor address; City; State; Zip Code 802 Christopher St. Austin, TX 78704 (If travel outside of Texas, complete Schedule T)		09/28/2014	212 West 33rd St		\$50.00	 	
Date Full name of contributor Out-of-state PAC (ID#) Amount of Contribution (if applicable) 10/25/2014 Contributor address; City; State; Zip Code 802 Christopher St. Austin, TX 78704 (If travel outside of Texas, complete Schedule T)					(If travel outside of	Texas, complete Schedule T)	
Burkhardt, William (Mr.) Contributor address; City; State; Zip Code \$150.00 Contributor address; City; State; Zip Code \$150.00 (If travel outside of Texas, complete Schedule T)		Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
802 Christopher St. Austin, TX 78704 (If travel outside of Texas, complete Schedule T)		Date)			
	:	10/25/2014	802 Christopher St.		\$150.00	! 	
Principal occupation / Job title (See Instructions) Employer (See Instructions)					(If travel outside of	Texas, complete Schedule T)	
		Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		

The	INSTRUCTION	אס Guide explains how to complete this form.		1 PAGE# Schedule: 4/3	35 Report: 8/56
2 FILE	R NAME	Tovo, Kathryne (Ms.)		3 ACCOUNT# 00005000	(Ethics Commission filers)
4 Da	ate	5 Full name of contributor ☐ out-of-state PAC (ID# Buttrey, Sarah (Ms.))	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
10/08	8/2014	6 Contributor address; City; State; Zip Code 902 W 31st Austin, TX 78705		\$250.00	
				(If travel outside of	Texas, complete Schedule T)
	ipal occup ily Docto	nation / Job title (See Instructions) r	10 Employer (See In Seton	structions)	
Da	ite	Full name of contributor uut-of-state PAC (ID# Campbell, Sarah (Ms.))	Amount of contribution (S)	In-kind contribution description (if applicable)
10/1	5/2014	Contributor address; City; State; Zip Code 1201 Woodland Ave Austin, TX 78704		\$100.00]]]
				(If travel outside of	Texas, complete Schedule T)
Princ	ipal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
Da	ate	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/26	6/2014	Contributor address; City; State; Zip Code 1802 Woodland Ave Austin, TX 78741		\$25.00	
				(If travel outside of	Texas, complete Schedule T)
Princ	ipal occup	pation / Job title (See Instructions)	Employer (See In	structions)	`_ .
Da	ate	Full name of contributor out-of-state PAC (ID# Chu, Millie (Ms.))	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/10	6/2014	Contributor address; City; State; Zip Code 8629-C Toro Creek Cove Austin, TX 78759	,	\$200.00	! ! !
† :				(If travel outside of	Texas, complete Schedule T)
	ipal occur e Manag	pation / Job title (See Instructions) ler	Employer (See In Frank Lam & As		
Da	ate	Full name of contributor ut-of-state PAC (ID#)	Amount of	In-kind contribution
		Clack, Judith (Ms.)		contribution (\$)	description (if applicable)
09/29	9/2014	Contributor address; City; State; Zip Code 2403 Forest Bend Dr Austin, TX 78704		\$20.00	
				(If travel outside of	Texas, complete Schedule T)
Princ	ipal occup	pation / Job title (See Instructions)	Employer (See In	<u> L`</u>	
<u> </u>					Electronic Filing Version 3.4.6

SCHEDULE A

TDD 1-800-735-2989

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

	The Instruction	N GUIDE explains how to complete this form.		1 PAGE# Schedule: 5/3	35 Report: 9/56	
2	FILER NAME	Tovo, Kathryne (Ms.)		3 ACCOUNT# 00005000	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Cocke, Paula (Ms.)	!)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	10/17/2014	6 Contributor address; City; State; Zip Code 1608 West Ninth Street Austin, TX 78703		\$150.00	1 1 1	
				(If travel outside of	Texas, complete Schedule T)	
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	estructions)		
	Date	Full name of contributor ut-of-state PAC (ID# Coldiron, Ron (Mr.)	<u>')</u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	09/26/2014	Contributor address; City; State; Zip Code 6509 Marblewood Austin, TX 78731		\$25.00	 	
				(If travel outside of	Texas, complete \$chedule T)	
	Principal occup	pation / Job title (See Instructions)	Employer (See In	<u> </u>	10.000, 00.000,000,000,000,000,000	
		,	, , ,	,		
	Date	Full name of contributor out-of-state PAC (ID# Collen, Cyndi (Ms.)	<u>; </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	10/15/2014	Contributor address; City; State; Zip Code 210 Fletcher St		\$100.00	! !	
		Austin, TX 78704		(If travel outside of	Texas, complete Schedule T)	
Г	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)		
		· · · · · · · · · · · · · · · · · · ·				
	Date	Full name of contributor	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	10/17/2014	Contributor address; City; State; Zip Code 5008 Eilers Ave Austin, TX 78751		\$50.00	! ! !	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	istructions)		
	Date	Full name of contributor	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	10/25/2014	Contributor address; City; State; Zip Code 304 B Montopolis Austin, TX 78741		\$25.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	istructions)		
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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/3	35 Report: 10/56
2	FILER NAME	Tovo, Kathryne (Ms.)		3 ACCOUNT # 00005000	(Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (ID# Crow, Dan (Mr.)	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	10/23/2014	6 Contributor address; City; State; Zip Code 2803 Down Cove Austin, TX 78704		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Crow, Steven (Mr.)	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/06/2014	Contributor address; City; State; Zip Code 3018 West Ave. Austin, TX 78705	,	\$100.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Davidson, William (Mr.)		Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/07/2014	Contributor address; City; State; Zip Code 1714 Palma Plaza Austin, TX 78703		\$350.00]] [
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In Self-employed	structions)	
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable) Food for houseparty
	10/19/2014	Contributor address; City; State; Zip Code 2609 Sherwood Ln Austin, TX 78704		\$13.99	event
			_	(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/19/2014	Contributor address; City; State; Zip Code 2609 Sherwood Ln Austin, TX 78704		\$100.00	1 1 1
L				(If travel outside of	Texas, complete Schedule T)
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)	

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 7/3	35 Report: 11/56
2	FILER NAME	Tovo, Kathryne (Ms.)		3 ACCOUNT# 00005000	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Debardelaben, Sean (Mr.))	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	10/07/2014	6 Contributor address; City; State; Zip Code 3011 Washington Square Austin, TX 78705	•••••	\$20.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/20/2014	Contributor address; City; State; Zip Code 1101 West Annie St Austin, TX 78704		\$100.00	!
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Denkler, Ann (Ms.))	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/15/2014	Contributor address; City; State; Zip Code 6112 Highlandale Dr. Austin, TX 78731		\$350.00	! ! !
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Executive As	eation / Job title (See Instructions) sistant	Employer (See In Travis County	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/24/2014	Contributor address; City; State; Zip Code 202 West 32nd St Austin, TX 78705		\$350.00	! ! !
				(if travel outside of	Texas, complete Schedule T)
	Principal occup Artist	eation / Job title (See Instructions)	Employer (See In Self-employed	structions)	
	Date	Full name of contributor out-of-state PAC (ID# Donnell, Dian (Ms.))	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/17/2014	Contributor address; City; State; Zip Code 1610 West 9 1/2 St Austin, TX 78703	•••••	\$20.00	
		•		(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	

	The Instruction	N Guide explains how to comp	olete this form.		1 PAGE# Schedule: 8/3	35 Report: 12/56
2	FILER NAME	Tovo, Kathryne (Ms.)			3 ACCOUNT # 00005000	(Ethics Commission filers)
4	Date	5 Full name of contributor Duffy, Mark (Mr.)	ut-of-state PAC (ID#)	7 Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/19/2014	6 Contributor address; 0 3301 Hemlock Ave Austin, TX 78722	City; State; Zip Code		\$100.00	!
					(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions	3)	10 Employer (See In	structions)	
	Date	Full name of contributor Dunaway, Jim (Mr.)	Out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/25/2014	Contributor address; (807 W 32nd St Austin, TX 78705	City; State; Zip Code		\$25.00	
					(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions	s)	Employer (See In	structions)	
	Date	Full name of contributor Dunaway, Margaret (Ms.)	Out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/25/2014	Contributor address; (807 W 32nd St Austin, TX 78705	City; State; Zip Code		\$25.00	! ! !
		·			(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions	s)	Employer (See In		Toxas, compare concesso 1,
-	Date	Full name of contributor Eastman, Liane (Ms.)	ut-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/25/2014	Contributor address; 0 3906 Ridgelea Dr Austin, TX 78731	City; State; Zip Code		\$50.00	
					1 '	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions	s) :	Employer (See In	structions)	
	Date	Full name of contributor Echols, Catharine (Ms.)	☐ out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/17/2014	Contributor address; 6 508 Harris Ave. Austin, TX 78705	City; State; Zip Code		\$100.00	
					(if traval autoido at	Texas, complete Schedule T)
\vdash	Principal occur	eation / Job title (See Instructions	s) I	Employer (See In	<u></u>	Texas, complete solicadie 1)
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	The Instruction	ON GUIDE explains how to complete this form.	· · · · · · · · · · · · · · · · · · ·	1 PAGE # Schedule: 9/3	35 Report: 13/56
2	FILER NAME	Tovo, Kathryne (Ms.)	*	3 ACCOUNT# 00005000	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (IDE) Ellis, Mary Dale (Ms.)	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	10/25/2014	6 Contributor address; City; State; Zip Code 1704 W Ave. Austin, TX 78701		\$150.00	l ! !
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor ut-of-state PAC (ID Ferguson, Frances (Ms.))#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/17/2014	Contributor address; City; State; Zip Code 1013 Harwood Place Austin, TX 78704		\$50.00	
				(If travel outside of	Texas, complete Schedule T)
_	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor)#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/28/2014	Contributor address; City; State; Zip Code 1625 Waterstone Ave Austin, TX 78703		\$250.00	
<u> </u>				'	Texas, complete Schedule T)
	Retired	ation / Job title (See Instructions)	Employer (See In N/A	istructions)	
	Date	Full name of contributor ut-of-state PAC (III Foerster, Sharon (Ms.))#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/28/2014	Contributor address; City; State; Zip Code 1625 Waterstone Ave Austin, TX 78703	•••••	\$250.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Retired	ation / Job title (See Instructions)	Employer (See in N/A	structions)	
	Date	Full name of contributor)#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/23/2014	Contributor address; City; State; Zip Code 703-B East 50th St Austin, TX 78751		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Director	ation / Job title (See Instructions)	Employer (See In South By South		
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	The Instruction	ON Guide explains how to complete this form.		1 PAGE # Schedule: 10	/35 Report: 14/56		
2	FILER NAME	Tovo, Kathryne (Ms.)		3 ACCOUNT # 00005000	(Ethics Commission filers)		
4	Date	5 Full name of contributor ut-of-state PAC (iD#Forrest, Vivian (Ms.))	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	10/23/2014	6 Contributor address; City; State; Zip Code 703-B East 50th St Austin, TX 78751		\$350.00	 		
				(if travel outside of	Texas, complete Schedule T)		
9	Principal occup Homemaker	ation / Job title (See Instructions)	10 Employer (See In N/A	structions)			
	Date	Full name of contributor)	Amount of contribution (S)	In-kind contribution description (if applicable)		
	10/24/2014	Contributor address; City; State; Zip Code 2837 Pearl St Austin, TX 78705		\$100.00	 		
				(if travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	10/18/2014	Contributor address; City; State; Zip Code 3125 Hemphill Park Austin, TX 78705		\$350.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Community V	ation / Job title (See Instructions) folunteer	Employer (See In N/A	structions)			
	Date	Full name of contributor ut-of-state PAC (ID# Gammon, William (Mr.))	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	10/18/2014	Contributor address; City; State; Zip Code 3125 Hemphill Park Austin, TX 78705		\$350.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Insurance Ag	eation / Job title (See Instructions) ent	Employer (See In Self-employed	structions)			
	Date	Full name of contributor	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	10/15/2014	Contributor address; City; State; Zip Code 3207 Kirbey Ln Austin, TX 78703		\$50.00	 		
L				· -	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
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	The Instruction	on Guide explains how to complete this for	m.		1 PAGE # Schedule: 11	/35 Report: 15/56	
2	FILER NAME	Tovo, Kathryne (Ms.)			3 ACCOUNT # 00005000	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-sta Gaston, Merianne (Ms.)	ate PAC (ID#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	10/14/2014	6 Contributor address; City; State; 715 Carolyn Ave. Austin, TX 78705	Zip Code		\$100.00	 - -	
					(If travel outside of	Texas, complete Schedute T)	
9	Principal occup	ation / Job title (See Instructions)		10 Employer (See In:	structions)		
	Date	Full name of contributor uut-of-sta Gentle, James (Mr.)	ate PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	10/08/2014	Contributor address; City; State; 206 Arthur Ln Austin, TX 78704	Zip Code		\$200,00] 	
					•	Texas, complete Schedule T)	
	Principal occup Attorney	eation / Job title (See Instructions)		Employer (See In: University of Te			
	Date	Full name of contributor ut-of-stage. Gill, Ramanjeet (Mr.)	ate PAC (ID#	÷)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	10/16/2014	Contributor address; City; State; 4308 Bellvue Ave Austin, TX 78756	Zip Code		\$100.00	† - 	
					(If travel outside of	Texas, complete Schedule T)	
<u> </u>	Orinainal ageur	eation / Job title (See Instructions)		Employer (See In		Texas, complete ochecals 1)	
		ation 7 300 title (See tristitucions)		Employer (See in	Sil delions)		
	Date	Full name of contributor out-of-stage out-	ate PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	10/01/2014	Contributor address; City; State; 903 West 14th St Austin, TX 78701	Zip Code		\$25.00	 	
		:			(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)		Employer (See In	structions)		
	Date	Full name of contributor	ate PAC (ID#	<i>t</i>)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	10/14/2014	Contributor address; City; State; 3815 Ave H Austin, TX 78751	Zip Code		\$50.00	 	
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					L	Texas, complete Schedule T)	
	Principal occup	eation / Job title (See Instructions)		Employer (See In	structions)		

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SCHEDULE A

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

The Instructi	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 12	2/35 Report: 16/56				
2 FILER NAME	Tovo, Kathryne (Ms.)		3 ACCOUNT # 00005000	(Ethics Commission filers)				
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Graham-Moore, Brian (Mr.)	*)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)				
10/12/2014	6 Contributor address; City; State; Zip Code 1817 East 40th St Austin, TX 78722		\$100.00	 				
			(If travel outside of	Texas, complete Schedule T)				
9 Principal occu	oation / Job title (See Instructions)	10 Employer (See In	structions)					
Date	Full name of contributor ut-of-state PAC (ID# Greenberg, Betsy (Ms.)	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)				
10/22/2014	Contributor address; City; State; Zip Code 3009 Washington Sq. Austin, TX 78705		\$100.00	 				
			(if travel outside of	Texas, complete Schedule T)				
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)					
Date	Full name of contributor	<u>*</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)				
10/20/2014	Contributor address; City; State; Zip Code 2304 Riverside Farms Rd Austin, TX 78741		\$20.00	 				
			(If travel outside of	Texas, complete Schedule T)				
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)					
Date	Full name of contributor	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)				
10/15/2014	Contributor address; City; State; Zip Code 2509 Hartford Rd Austin, TX 78703		\$100.00	 				
			1.`	Texas, complete Schedule T)				
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)					
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)				
10/15/2014	Contributor address; City; State; Zip Code 2509 Hartford Rd Austin, TX 78703		\$100.00	1 				
			(If travel outside of	Texas, complete Schedule T)				
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)					

POLITICAL CONTRIBUTIONS

		CAL CONTRIBUTIONS THAN PLEDGES OR LOAN		SCHEDULE A	
	The Instruction	on Guide explains how to complete this form.		1 PAGE#	/25 Papart: 17/55
2	FILER NAME	Tovo, Kathryne (Ms.)		3 ACCOUNT # 00005000	/35 Report: 17/56 (Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (ID# Halley, Shannon (Ms.))	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	10/06/2014	6 Contributor address; City; State; Zip Code 3107 Grandview St Austin, TX 78705		\$50.00	
					Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In:	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Hanlon, Ellie (Ms.))	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/14/2014	Contributor address; City; State; Zip Code 4801 Caswell Ave Austin, TX 78751		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/26/2014	Contributor address; City; State; Zip Code 1700 Bouldin Austin, TX 78704		\$200.00	
·				(If travel outside of	Texas, complete Schedule T)
	Principal occup Clinical Profe	ation / Job title (See Instructions) ssor	Employer (See In: University of Te		
	Date	Full name of contributor out-of-state PAC (ID# Harris, L.C. (Mr.))	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/08/2014	Contributor address; City; State; Zip Code P.O. Box 9723 Austin, TX 78766		\$50.00	!
				,	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Haverlah, Kirsha (Ms.))	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/17/2014	Contributor address; City; State; Zip Code 6904 Star Dr Austin, TX 78745		\$50.00	í
				•	Texas, complete Schedule T)
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)	,

	The INSTRUCTION	אס Guide explains how to complete this form.		1 PAGE# Schedule: 14	/35 Report: 18/56
2	FILER NAME	Tovo, Kathryne (Ms.)		3 ACCOUNT # 00005000	(Ethics Commission filers)
4	Date	5 Full name of contributor out-of-state PAC (ID# Heinen, Anne (Ms.)		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	10/16/2014	6 Contributor address; City; State; Zip Code 3010 Washington Sq. Austin, TX 78705		\$75.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Henderson, Pattye (Ms.))	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/28/2014	Contributor address; City; State; Zip Code 923 Park Blvd Austin, TX 78751		\$75.00	
				(If travel outside of	Texas, complete Schedule T)
Н	Principal occup	pation / Job title (See Instructions)	Employer (See In		
_	Date	Full name of contributor out-of-state PAC (ID# Hernandez, Mack Ray (Mr.)	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/15/2014	Contributor address; City; State; Zip Code 1200 Bouldin Ave. Austin, TX 78704		\$200.00	
				<u> </u>	Texas, complete Schedule T)
	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In Self-employed	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/17/2014	Contributor address; City; State; Zip Code 7104 West Rim Dr Austin, TX 78731		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	eation / Job title (See Instructions)	Employer (See in	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Hines, Barbara (Ms.))	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/26/2014	Contributor address; City; State; Zip Code 1405 Wilshire Blvd Austin, TX 78722		\$100.00	
L				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	

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POLITICAL CONTRIBUTIONS

		CAL CONTRIBUTIONS THAN PLEDGES OR LOAN	IS		SCHEDULE A
=	The Instruction	אס Guide explains how to complete this form.	<u>-</u>	1 PAGE#	5/35 Report: 19/56
2	FILER NAME	Tovo, Kathryne (Ms.)		3 ACCOUNT # 00005000	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Hirsch, Michael (Mr.))	7 Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/28/2014	6 Contributor address; City; State; Zip Code 600 Texas Ave. Austin, TX 78705		\$50.00	1
				(If travel outside of	Texas, complete Schedule T)
9	Principal occur	pation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor uut-of-state PAC (ID# Hoberman, Louisa (Ms.))	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/30/2014	Contributor address; City; State; Zip Code 2637 West 49th St Austin, TX 78731		\$20.00	
				(if travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Holbrook, Deborah (Ms.))	Amount of contribution (S)	In-kind contribution description (if applicable)
	10/17/2014	Contributor address; City; State; Zip Code 1615 Palma Plaza Austin, TX 78703		\$25.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Ingle, Mary (Ms.))	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/17/2014	Contributor address; City; State; Zip Code 3406 Duval Street Austin, TX 78705		\$50.00	! !
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Iverson, Nancy (Ms.))	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/25/2014	Contributor address; City; State; Zip Code 506 West 34th Austin, TX 78705	,	\$125.00	 - -
				(If trough autality of	Toyac complate Sabadula #
\vdash	Principal occur	pation / Job title (See Instructions)	Employer (See In	<u> </u>	Texas, complete Schedule T)
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Austin, Texas 78711-2070 (512)463-5800

SCHEDULE A

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS 1 PAGE # The INSTRUCTION GUIDE explains how to complete this form. Schedule: 16/35 Report: 20/56 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Tovo, Kathryne (Ms.) 00005000 5 Full name of contributor ut-of-state PAC (ID#_ In-kind contribution Date Amount of contribution (\$) description (if applicable) Iverson, Rick (Mr.) 10/25/2014 6 Contributor address; City; State; Zip Code \$125.00 506 West 34th Austin, TX 78705 (If travel outside of Texas, complete Schedule T) 9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Amount of In-kind contribution Date contribution (\$) description (if applicable) Jimenez, Kisla (Ms.) Contributor address; City; State; Zip Code 10/14/2014 \$125.00 3012 West Ave. Austin, TX 78705 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor ut-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) King, David (Mr.) Contributor address; City; State; Zip Code \$50.00 10/13/2014 1808 Kerr St Austin, TX 78704 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) In-kind contribution Date Amount of contribution (\$) description (if applicable) King, John (Mr.) Contributor address; City; State; Zip Code \$50.00 10/17/2014 6005 Shoalwood Ave. Austin, TX 78757 (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) Full name of contributor ut-of-state PAC (ID# Amount of In-kind contribution Date contribution (\$) description (if applicable) Kinser, Lee (Mr.) Contributor address; City; State; Zip Code 10/01/2014 \$350.00 201 Lee Barton Dr. Austin, TX 78704 (if travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Pitch & Putt Owner

					
	The Instruction	N GUIDE explains how to complete this form.		1 PAGE# Schedule: 17	/35 Report: 21/56
2	FILER NAME	Tovo, Kathryne (Ms.)		3 ACCOUNT # 00005000	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID≰ Kirk, Saundra (Ms.)	·) .	7 Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/17/2014	6 Contributor address; City; State; Zip Code 2117 Clifton St. Austin, TX 78704		\$50.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/21/2014	Contributor address; City; State; Zip Code 1011 Brodie St	•••••	\$60.00	
		#5 Austin, TX 78704			
					Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/17/2014	Contributor address; City; State; Zip Code 12349 Metric Blvd Apt 1612		\$65.00	! !
		Austin, TX 78758 .		(If travel outside of	Texas, complete Schedule T)
-	Principal occur	pation / Job title (See Instructions)	Employer (See In	structions)	
_				1	
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/17/2014	Contributor address; City; State; Zip Code 3506 Far View Dr. Austin, TX 78730		\$50.00	
				(If travel outside of	Texas, complete Schedule T)
Г	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
L				ſ	
	Date	Full name of contributor ut-of-state PAC (ID# Lewis, Dawn (Ms.)	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/17/2014	Contributor address; City; State; Zip Code 4509 Edgemont Dr Austin, TX 78731		\$50.00	
1				(If travel outside of	Texas, complete Schedule T)
	Principal occup	Dation / Job title (See Instructions)	Employer (See In	<u> </u>	The state of the s
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Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 (512)463-5800

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

	The Instruction	N GUIDE explains how to complete this form.		1 PAGE# Schedule: 18	/35 Report: 22/56		
2	FILER NAME	Tovo, Kathryne (Ms.)		3 ACCOUNT # 00005000	(Ethics Commission filers)		
4	Date	5 Full name of contributor	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	10/17/2014	6 Contributor address; City; State; Zip Code 2400-B Vista Ln Austin, TX 78703		\$200.00	 		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Professor	ation / Job title (See Instructions)	10 Employer (See In: St. Edwards Un				
	Date	Full name of contributor ut-of-state PAC (IDa Lipscombe, John (Mr.)	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	10/15/2014	Contributor address; City; State; Zip Code 6600 Mesa Dr. Austin. TX 78731		\$100.00	 		
	•			(If travel outside of	Texas, complete Schedule T)		
-	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)			
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	09/28/2014	Contributor address; City; State; Zip Code 212 West 33rd St Austin, TX 78705		\$50.00	 		
		Austri, 17 70705		(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor	/)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	10/04/2014	Contributor address; City; State; Zip Code 606 Harthan St Austin, TX 78703	• • • • • • • • • • • • • • • • • • • •	\$100.00] 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	10/17/2014	Contributor address; City; State; Zip Code 606 Harthan St Austin, TX 78703		\$50.00	 		
		, , , , , , , , , , , , , , , , , , ,		(If traval autoids of	Toyon complete Schodule T		
	Principal occup	eation / Job title (See Instructions)	Employer (See In	<u> </u>	Texas, complete Schedule T)		
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POLITICAL CONTRIBUTIONS

	OTHER THAN PLEDGES OR LOANS					
	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 19)/35 Report: 23/56	
2	FILER NAME	Tovo, Kathryne (Ms.)		3 ACCOUNT # 00005000	(Ethics Commission filers)	
4	Date	5 Full name of contributor □ out-of-state PAC (ID# Mardegian, Rachael (Ms.))	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	10/23/2014	6 Contributor address; City; State; Zip Code 2501 Quarry Rd Austin, TX 78703		\$350.00	! ! !	
				(If travel outside of	Texas, complete Schedule T)	
9		ation / Job title (See Instructions) cts Coordinator	10 Employer (See In South By South			
	Date	Full name of contributor ut-of-state PAC (ID# Marks, Scott (Mr.)	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	10/17/2014	Contributor address; City; State; Zip Code 706 Oakland Ave. Austin, TX 78703		\$100.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor ut-of-state PAC (IDA Maxwell, Mary Gay (Ms.)	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	10/17/2014	Contributor address; City; State; Zip Code 111 Laurel Ln Austin, TX 78705		\$50.00	 	
					Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor	<u> </u>	Arnount of contribution (\$)	In-kind contribution description (if applicable)	
	09/27/2014	Contributor address; City; State; Zip Code 3824 Avenue F Austin, TX 78751		\$50.00	! ! !	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor ut-of-state PAC (ID# McAfee, Melanie (Ms.)	<u>; </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	10/14/2014	Contributor address; City; State; Zip Code 4120 Mattie St Austin, TX 78754		\$50.00	 	
	,			(If trave) outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	<u> </u>	The second secon	
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Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 (512)463-5800

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

TDD 1-800-735-2989

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	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 20	/35 Report: 24/56
2	FILER NAME	Tovo, Kathryne (Ms.)		3 ACCOUNT # 00005000	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# McArthur, Barbara (Ms.))	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	10/01/2014	6 Contributor address; City; State; Zip Code 5700 Clay Avenue Austin, TX 78756		\$50.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occur	eation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# McArthur, Barbara (Ms.)		Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/17/2014	Contributor address; City; State; Zip Code 5700 Clay Avenue Austin, TX 78756		\$50.00	
				(if travel outside of	Texas, complete Schedule T)
	Principal occup	Deation / Job title (See Instructions)	Employer (See In		Texas, compare concease 1,
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/17/2014	Contributor address; City; State; Zip Code 5703 Shoalwood Ave. Austin, TX 78756		\$50.00	
				<u>1 '</u>	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See In	estructions)	
:	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/23/2014	Contributor address; City; State; Zip Code 7400 Valburn Dr Austin, TX 78731		\$200.00	! ! !
				(If travel outside of	Texas, complete Schedule T)
	Principal occur CEO	pation / Job title (See Instructions)	Employer (See In Austin Cab Co	structions)	
	Date	Full name of contributor out-of-state PAC (ID# Mehdy, Mona (Ms.))	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/16/2014	Contributor address; City; State; Zip Code 5004 Smoky Mountain Dr. Austin, TX 78727		\$15.00	1
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See In	<u></u>	

OTHER THAN PLEDGES OR LOANS

POLITICAL CONTRIBUTIONS

SCHEDULE A

TDD 1-800-735-2989

	The Instruction	N GUIDE explains how to complete this form.		1 PAGE # Schedule: 21	/35 Report: 25/56	
2 1	FILER.NAME	Tovo, Kathryne (Ms.)		3 ACCOUNT # 00005000	(Ethics Commission filers)	
4	Date	5 Full name of contributor	;)	7 Amount of contribution (S)	8 In-kind contribution description (if applicable)	
1	0/07/2014	6 Contributor address; City; State; Zip Code P.O. Box 684371 Austin, TX 78768		\$200.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup Librarian	ation / Job title (See Instructions)	10 Employer (See In: City of Austin	structions)		
	Date	Full name of contributor ut-of-state PAC (ID: Miller, Helen (Ms.)	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
1	0/04/2014	Contributor address; City; State; Zip Code 8207 Viewridge Dr Austin, TX 78724	• • • • • • • • • • • • • • • • • • • •	\$25.00	[]]	
		·		(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	-	<u> </u>	
	·					
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
C	9/28/2014	Contributor address; City; State; Zip Code 600 Texas Ave. Austin, TX 78705		\$50.00	 	
		Table 17 Total		(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Émployer (See In	structions)		
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
1	0/16/2014	Contributor address; City; State; Zip Code 4112 Speedway Austin, TX 78751		\$350.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup Editor/Writer	ation / Job title (See Instructions)	Employer (See In Self-employed	structions)		
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
1	0/20/2014	Contributor address; City; State; Zip Code 6301 Cat Mountain Cove Austin, TX 78731		\$350.00	 	
		radomij in rotot		(If travel outside of	Texas, complete Schedule T)	
	Principal occup Professor	ation / Job title (See Instructions)	Employer (See In University of Te	structions)		

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_	The Instruction	on Guide explains how to complete this form.			1 PAGE#	/35 Report: 26/56
2	FILER NAME	Tovo, Kathryne (Ms.)			3 ACCOUNT # 00005000	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state I Mok, Amy (Ms.)	AC (ID#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	10/20/2014	6 Contributor address; City; State; Zi 6301 Cat Mountain Cove Austin, TX 78731	Code		\$350.00	ι
					(If travel outside of	Texas, complete Schedule T)
9	Principal occup Founder/CEC	ation / Job title (See Instructions)		loyer (See Ins In American	structions) Cultural Center	
	Date	Full name of contributor	AC (ID#	······)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/17/2014	Contributor address; City; State; Zi 6005 Shoalwood Ave. Austin, TX 78757	Code		\$50.00	
					(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Emp	loyer (See Ins	structions)	
	Date	Full name of contributor	AC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/12/2014	Contributor address; City; State; Zi 6401 Carrington Dr. Austin, TX 78749) Code	,	\$100.00	
		7,456,17			(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Emp	loyer (See Ins		
						<u> </u>
	Date	Full name of contributor	AC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/20/2014	Contributor address; City; State; Zi 300 South Lamar Blvd #208 Austin, TX 78704	Code		\$100.00	
					•	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Emp	loyer (See Ins	structions)	
	Date	Full name of contributor ut-of-state I Nazor, Craig (Mr.)	AC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/26/2014	Contributor address; City; State; Zi 11701 Barchetta Dr Austin, TX 78758	code		\$50.00	
		· ····			(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Emp	loyer (See Ins		
						Electronic Filling Version 3.4

	The Instruction	ом Guide explains how to corr	plete this form.		1 PAGE# Schedule: 23	/35 Report: 27/56
2	FILER NAME	Tovo, Kathryne (Ms.)			3 ACCOUNT # 00005000	(Ethics Commission filers)
4	Date	5 Full name of contributor Palaima, Carolyn (Ms.)	out-of-state PAC (ID#	<u>; </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	09/28/2014	6 Contributor address; 505 E. 40th St Austin, TX 78751	City; State; Zip Code		\$50.00	
					,	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instruction	is)	10 Employer (See In	structions)	
	Date	Full name of contributor Perkins, Karen (Ms.)	out-of-state PAC (ID#	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/13/2014	Contributor address; 10600 McFarlie Cove Austin, TX 78750	City; State; Zip Code		\$50.00	
					(If travel outside of	Texas, complete Schedule T)
┡	Principal occur	ation / Job title (See Instruction	ne)	Employer (See In	J <u>`</u>	Texas, complete octicular ()
	Fillicipal occup					
	Date	Full name of contributor Pohlman, Joyce (Ms.)	☐ out-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/17/2014	Contributor address; 611 Fletcher St. Austin, TX 78704	City; State; Zip Code		\$50.00	Texas, complete Schedule T)
_	Principal occur	eation / Job title (See Instruction	10)	Employer (See In	,	Tokas, complete concesse t/
	Fillicipal occup	ation 7 300 little (3ee matraction	13)	Linployer (oee in	istractions)	
	Date	Full name of contributor Read-Orr, Bookie (Ms.)	out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/19/2014	Contributor address; 908 B Post Oak St. Austin, TX 78704	City; State; Zip Code		\$250.00	
					(If travel outside of	Texas, complete Schedule T)
	Principal occup Accountant	pation / Job title (See Instruction	ns)	Employer (See In Texas Dept of A	nstructions) Agriculture, AAOT	В
	Date	Full name of contributor Reed, Cyrus (Mr.)	☐ out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/22/2014	Contributor address; 4205 Avenue F Austin, TX 78751	City; State; Zip Code		\$100.00	
Ī					(If travel outeids of	Texas, complete Schedule T)
\vdash	Principal socue	pation / Job title (See Instruction	ne)	Employer (See In	<u> </u>	revael combiere actieurie ()
	-тпюрат осс и р	auou aod dhe (See IIISII (Clio)	13)	Enthioser (266 III	iau delloria)	

SCHEDULE A

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

	The Instruction	אס Guide explains how to complete this form.		1 PAGE # Schedule: 24	1/35 Report: 28/56			
2	FILER NAME	Tovo, Kathryne (Ms.)		3 ACCOUNT # 00005000	(Ethics Commission filers)			
4	Date	5 Full name of contributor uut-of-state PAC (ID#Retherford, James (Mr.)	!)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
	10/16/2014	6 Contributor address; City; State; Zip Code 1009 Daniel Dr. Austin, TX 78704		\$10.00	 			
				(If travel outside of	Texas, complete Schedule T)			
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)				
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	09/28/2014	Contributor address; City; State; Zip Code 3903 Duval St Austin, TX 78751		\$100.00	 			
				(If travel outside of	Texas, complete Schedule T)			
H	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	<u> </u>			
	Date	Full name of contributor ut-of-state PAC (ID# Richards, Joanne (Ms.)	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	10/06/2014	Contributor address; City; State; Zip Code 7102 Coachwhip Ho Austin, TX 78750		\$50.00	 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)				
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	10/17/2014	Contributor address; City, State; Zip Code 1000 Glen Oaks Ct. Austin, TX 78702		\$25.00	 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup	oation / Job title (See Instructions)	Employer (See In	structions)				
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	09/27/2014	Contributor address; City; State; Zip Code 611 Terrell Hill Dr. Austin, TX 78704		\$200.00	[[]			
				,	Texas, complete Schedule T)			
	Principal occup Retired	pation / Job title (See Instructions)	Employer (See In N/A	istructions)				
_					Electronic Filing Version 2.4.1			

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SCHEDULE A

POLITICAL CONTRIBUTIONS

	OTHER THAN PLEDGES OR LOANS						
	The Instruction	אס Guide explains how to complete this form.		1 PAGE # Schedule: 25	/35 Report: 29/56		
2	FILER NAME	Tovo, Kathryne (Ms.)		3 ACCOUNT # 00005000	(Ethics Commission filers)		
4	Date	5 Full name of contributor	#)	7 Amount of contribution (S)	8 In-kind contribution description (if applicable)		
	10/17/2014	6 Contributor address; City; State; Zip Code 611 Terrell Hill Dr. Austin, TX 78704		\$50.00	 		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Retired	ation / Job title (See Instructions)	10 Employer (See in N/A	structions)			
	Date	Full name of contributor	#)	Amount of contribution (S)	In-kind contribution description (if applicable)		
	10/07/2014	Contributor address; City; State; Zip Code 3127 Hedgewater Dr. Austin, TX 78733		\$50.00	 		
		Adding the following the first the f		(If travel outside of	Texas, complete Schedule T)		
\vdash	Principal occup	eation / Job title (See Instructions)	Employer (See In	1 '	Totals, complete concessor,		
	Date	Full name of contributor ut-of-state PAC (ID Rogoff, Regina (Ms.)	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	10/17/2014	Contributor address; City; State; Zip Code 1705 Schieffer Austin, TX 78722		\$50.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	vation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor ut-of-state PAC (ID Russell, James (Mr.)	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	10/24/2014	Contributor address; City; State; Zip Code 1210 E M Franklin Austin, TX 78721		\$20.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	10/05/2014	Contributor address; City; State; Zip Code 1305 West 9 1/2 St #101 Austin, TX 78703		\$25.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	,		
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	The Instruction	אס Guide explains how to complete this form.		1 PAGE # Schedule: 26	/35 Report: 30/56		
2	FILER NAME	Tovo, Kathryne (Ms.)		3 ACCOUNT # 00005000	(Ethics Commission filers)		
4	Date	5 Full name of contributor out-of-state PAC (ID# Sanchez, Charles (Mr.))	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	10/13/2014	6 Contributor address; City; State; Zip Code 2608 West 49th Street Austin, TX 78731		\$25.00	 		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)			
	Date	Full name of contributor uut-of-state PAC (ID# Sanders, Robin (Ms.))	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	10/17/2014	Contributor address; City; State; Zip Code 1508 Newning Ave. Austin, TX 78704		\$50.00	 		
				()f travel outside of	Texas, complete Schedule T)		
-	Principal occup	pation / Job title (See Instructions)	Employer (See In	•			
	•	, ,	, , ,	·			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	10/23/2014	Contributor address; City; State; Zip Code 3656 Ranch Creek Dr. Austin, TX 78730		\$150.00	 - -		
					Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	09/30/2014	Contributor address; City; State; Zip Code 1115 West 7th St #300 Austin, TX 78703		\$100.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor ut-of-state PAC (ID# Searcy, Judith (Ms.)	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	10/16/2014	Contributor address; City; State; Zip Code 821 Harris Avenue Austin, TX 78705		\$100.00	[[]		
}				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	pation / Job title (See Instructions)	Employer (See In	,	, , , , , , , , , , , , , , , , , , ,		

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	The INSTRUCTION	אס Guide explains how to complete this form.		1 PAGE# Schedule: 27	7/35 Report: 31/56			
2	FILER NAME	Tovo, Kathryne (Ms.)		3 ACCOUNT # 00005000	(Ethics Commission filers)			
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Seeger, Gary (Mr.)	*)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
	10/22/2014	6 Contributor address; City; State; Zip Code 6705 Winterberry Dr Austin, TX 78750		\$100.00	[-			
				(If travel outside of	Texas, complete Schedule T)			
9	Principal occup	eation / Job title (See Instructions)	10 Employer (See In	estructions)				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	10/17/2014	Contributor address; City; State; Zip Code 2604 Geraghty Austin, TX 78757	• • • • • • • • • • • • • • • • • • • •	\$200.00	 			
		,		(If travel outside of	Texas, complete Schedule T)			
	Principal occur Consultant	ation / Job title (See Instructions)	Employer (See In Self-employed	structions)				
	Consultant		Gen-employed					
	Date	Full name of contributor ut-of-state PAC (ID# Shea, Mike (Mr.)	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	10/23/2014	Contributor address; City; State; Zip Code 40801 Broken Bow Pass Austin, TX 78745	• • • • • • • • • • • • • • • • • • • •	\$350.00	i 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup Executive Dir	pation / Job title (See Instructions) ector	Employer (See In South By South					
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	10/08/2014	Contributor address; City; State; Zip Code 902 W 31st St Austin, TX 78705	• • • • • • • • • • • • • • • • • • • •	\$250.00	 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup Physician/Ex	ecutive	Employer (See In Seton	nstructions)				
	Date	Full name of contributor	.)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	10/05/2014	Contributor address; City; State; Zip Code 611 Oakland Ave Austin, TX 78703		\$50.00	I 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup	pation / Job title (See Instructions)	Employer (See In	<u> </u>				

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SCHEDULE A

POLITICAL CONTRIBUTIONS

	OTHER THAN PLEDGES OR LUANS						
	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 28	/35 Report: 32/56		
2	FILER NAME	Tovo, Kathryne (Ms.)		3 ACCOUNT # 00005000	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Smolen, Paul (Mr.)	!)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	10/17/2014	6 Contributor address; City; State; Zip Code 3812 Cherrywood Rd Austin, TX 78722		\$50.00	 		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup	eation / Job title (See Instructions)	10 Employer (See In	structions)			
	Date	Full name of contributor out-of-state PAC (ID# Speights, Sara (Ms.)	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	10/06/2014	Contributor address; City; State; Zip Code 2701 West 49 1/2 St Austin, TX 78731		\$50.00	! ! !		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	pation / Job title (See Instructions)	Employer (See In	<u> </u>	Toxas, complete contacts 1,		
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
e e	10/01/2014	Contributor address; City; State; Zip Code 1225 Corona Austin, TX 78723		\$250.00	 		
ŧ				(If travel outside of	Texas, complete Schedule T)		
-	Principal occup	pation / Job title (See Instructions)	Employer (See In		Texas, complete schedule 1/		
	Retired		N/A				
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	10/16/2014	Contributor address; City; State; Zip Code P.O. Box 5674 Austin, TX 78763		\$200.00	 		
		·		(If travel outside of	Texas, complete Schedule T)		
	Principal occup President	ation / Job title (See Instructions)	Employer (See In Firewatch Texa				
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	09/28/2014	Contributor address; City; State; Zip Code 2812 Brookview Rd Austin, TX 78722		\$50.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
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	OTHER THAN PLEDGES OR LOANS							
	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 29	/35 Report: 33/56			
2	FILER NAME	Tovo, Kathryne (Ms.)		3 ACCOUNT # 00005000	(Ethics Commission filers)			
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Stone, Traci (Ms.))	7 Amount of contribution (S)	8 In-kind contribution description (if applicable)			
	09/28/2014	6 Contributor address; City; State; Zip Code 2812 Brookview Rd Austin, TX 78722		\$50.00	1 1 1			
ĺ				(If travel outside of	Texas, complete Schedule T)			
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)				
	Date	Full name of contributor ut-of-state PAC (ID# Stringer, Beverly (Ms.))	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	09/29/2014	Contributor address; City; State; Zip Code 1916 David St Austin, TX 78705		\$200.00	 - -			
			·	l. `	Texas, complete Schedule T)			
Principal occupation / Job title (See Instructions) Attorney		Employer (See In: Self-Employed	structions)					
	Date	Full name of contributor ut-of-state PAC (ID# Swasdee, Rommanee (Ms.))	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	10/17/2014	Contributor address; City; State; Zip Code 201 South Tumbleweed Tr Austin, TX 78733		\$50.00	 			
				(If travel outside of	Texas, complete Schedule T)			
-	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)				
	Date	Full name of contributor	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	10/23/2014	Contributor address; City; State; Zip Code 400 Bowie Street Austin, TX 78703		\$350.00	 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup Managing Dir	ation / Job title (See Instructions) ector	Employer (See In South By South					
	Date	Full name of contributor ut-of-state PAC (ID# Taniguchi, Evan (Mr.)	()	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	10/15/2014	Contributor address; City; State; Zip Code 1609 West 6th St Austin, TX 78703		\$350.00	 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup Architect	ation / Job title (See Instructions)	Employer (See In Taniguchi Archi					

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SCHEDULE A

POLITICAL CONTRIBUTIONS OTHER THAN DI FROES OR LOANS

	OTHER THAN PLEBGES ON EGANS							
	The Instruction	N Guide explains how to complete this form.		1 PAGE # Schedule: 30	/35 Report: 34/56			
2	FILER NAME	Tovo, Kathryne (Ms.)		3 ACCOUNT # 00005000	(Ethics Commission filers)			
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Team, Linda (Ms.)	·)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
	09/28/2014	6 Contributor address; City; State; Zip Code 600 Bellevue Place Austin, TX 78705		\$50.00	 			
				(If travel outside of	Texas, complete Schedule T)			
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)				
	Date	Full name of contributor	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
į	10/15/2014	Contributor address; City; State; Zip Code 9201 Quail Hill Cir Austin, TX 78758		\$50.00	 			
				(If travel outside of	Texas, complete Schedule T)			
-	Principal occur	pation / Job title (See Instructions)	Employer (See In	<u> </u>				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	10/15/2014	Contributor address; City; State; Zip Code 9201 Quait Hill Cir Austin, TX 78758		\$50.00	1 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)				
	Date	Full name of contributor	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	10/05/2014	Contributor address; City; State; Zip Code 608 West Croslin St Austin, TX 78752		\$190.00	 			
ł				(If travel outside of	Texas, complete Schedule T)			
	Principal occur	ation / Job title (See Instructions)	Employer (See In	structions)				
	Date	Full name of contributor	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	10/16/2014	Contributor address; City; State; Zip Code P.O. Box 300038 Austin, TX 78703	, . ,	\$50.00	 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup	pation / Job title (See Instructions)	Employer (See In	<u> </u>	,			
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Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 (512)463-5800

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 31	/35 Report: 35/56			
2	FILER NAME	Tovo, Kathryne (Ms.)		3 ACCOUNT# 00005000	(Ethics Commission filers)			
4	Date	5 Full name of contributor ut-of-state PAC (ID Tipps, Lisa (Ms.)	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
	10/22/2014	6 Contributor address; City; State; Zip Code P.O. Box 300038 Austin, TX 78703		\$50.00	[
		Adding 1777-07-00		(If travel outside of	Texas, complete Schedule T)			
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)				
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	10/07/2014	Contributor address; City; State; Zip Code 1811 West 38th St Austin, TX 78731		\$50.00	 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)				
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	10/16/2014	Contributor address; City; State; Zip Code 1811 West 38th St Austin, TX 78731		\$50.00	 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)				
	Date	Full name of contributor ut-of-state PAC (ID Underwood, Ralph (Mr.)	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	10/21/2014	Contributor address; City; State; Zip Code 901 West 9th Street #311 Austin, TX 78703		\$100.00	1 			
	_			(If travel outside of	Texas, complete Schedule T)			
	Principal occup	pation / Job title (See Instructions)	Employer (See In	nstructions)				
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	10/17/2014	Contributor address; City; State; Zip Code 2702 Dupont Cove Austin, TX 78748		\$50.00	! ! !			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup	Loation / Job title (See Instructions)	Employer (See Ir		Total complete constant ()			

	The Instruction	N Guide explains how to com	plete this form.		1 PAGE # Schedule: 32	/35 Report: 36/56	
2	FILER NAME	Tovo, Kathryne (Ms.)			3 ACCOUNT # 00005000	(Ethics Commission filers)	
4	Date	5 Full name of contributor Valek, Michele (Ms.)	out-of-state PAC (ID#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	10/24/2014	6 Contributor address; 2837 Pearl St Austin, TX 78705	City; State; Zip Code		\$100.00	 	
					(If travel outside of	Texas, complete Schedule T)	
9	Principal occup	ation / Job title (See Instruction	is)	10 Employer (See In	structions)		
	Date	Full name of contributor Vargas, Jesse (Mr.)	out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	09/26/2014	Contributor address; 4305 Hollow Hill Dr. San Antonio, TX 78217	City; State; Zip Code		\$350.00	 	
					(If travel outside of	Texas, complete Schedule T)	
	Principal occup General Mana	ation / Job title (See Instruction ager	es)	Employer (See In Ferrari World	structions)		
	Date	Full name of contributor Walker, Scheleen (Ms.)	out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	09/26/2014	Contributor address; 1202 San Antonio St Austin, TX 78701	City; State; Zip Code		\$25.00	 	
ļ					(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instruction	ns)	Employer (See In	structions)		
	Date	Full name of contributor Warner, Phyllis (Ms.)	☐ out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	10/15/2014	Contributor address; 5701 Trailridge Dr Austin, TX 78731	City; State; Zip Code		\$50.00	I I I	
					(If travel outside of	Texas, complete Schedule T)	
	Principal occup	eation / Job title (See Instruction	is)	Employer (See In	structions)		
	Date	Full name of contributor Watts, Carol (Ms.)	ut-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	10/16/2014	Contributor address; 1308 S. 5th St Austin, TX 78704	City; State; Zip Code		\$20.00	 	
		,			المراجع	Toyse semplete Schodule To	
	Principal occup	ation / Job title (See Instruction	ns)	Employer (See In	`	Texas, complete Schedule T)	
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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

_ _ _	The Instruction Guide explains how to complete this form.			1 PAGE # Schedule: 33	/35 Report: 37/56
2	FILER NAME	Tovo, Kathryne (Ms.)		3 ACCOUNT # 00005000	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Weatherford, Trudie (Ms.))	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	09/26/2014	6 Contributor address; City; State; Zip Code 4820 Trail Crest Cir Austin, TX 78735		\$100.00	! ! !
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Weed, Betty (Ms.))	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/24/2014	Contributor address; City; State; Zip Code 2218 Alta Vista Ave. Austin, TX 78704		\$150.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/17/2014	Contributor address; City; State; Zip Code 2001 Coachlamp Dr Cedar Park, TX 78613		\$50.00	
				l *	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See In	structions)	·	
	Date	Full name of contributor ut-of-state PAC (ID# White, Sage (Ms.))	Amount of contribution (\$)	In-kind contribution description (if applicable)
٠.	10/25/2014	Contributor address; City; State; Zip Code 1904 Kenwood Ave Austin, TX 78704		\$250.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In Self-employed	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Wilcox, Scott (Mr.)	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/23/2014	Contributor address; City; State; Zip Code 2501 Quarry Rd Austin, TX 78703		\$350.00	1
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Director of Te	ation / Job title (See Instructions) schnology	Employer (See In South By South		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

L						
The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 34/35 Report: 38/56			
2	FILER NAME	Tovo, Kathryne (Ms.)		3 ACCOUNT# 00005000	(Ethics Commission filers)	
4	Date	5 Full name of contributor ut-of-state PAC (ID# Wilcox, Toni (Ms.)	!)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	10/23/2014	6 Contributor address; City; State; Zip Code 4801 Broken Bow Pass Austin, TX 78745		\$350.00	 	
				(If travel outside of	Texas, complete Schedule T)	
9	Principal occup Homemaker	ation / Job title (See Instructions)	10 Employer (See In N/A	structions)		
	Date	Full name of contributor ut-of-state PAC (ID# Wilkenson, Julia (Ms.)	f)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	10/25/2014	Contributor address; City; State; Zip Code 407 W 32nd Austin, TX 78705		\$250.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup Artist	eation / Job title (See Instructions)	Employer (See In Self-employed	structions)		
	Date	Full name of contributor ut-of-state PAC (ID# Williams, Jonathan (Mr.)	<u>*)</u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	10/14/2014	Contributor address; City; State; Zip Code 3012 West Ave. Austin, TX 78705		\$225.00	1 	
		Adding 1X70100		L <u>.</u>	Texas, complete Schedule T)	
	Principal occup Owner	eation / Job title (See Instructions)	Employer (See In Tesoros Tradin			
	Date	Full name of contributor ut-of-state PAC (ID) Witte, Tracy (Ms.))	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	10/25/2014	Contributor address; City; State; Zip Code 908 E. 14th Street Austin, TX 78702		\$150.00	 	
		Austri, TA 70702		•	· _	
				,	Texas, complete Schedule T)	
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor ut-of-state PAC (ID: Womack, Delano (Mr.)	()	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	09/28/2014	Contributor address; City; State; Zip Code 723 Sparks Ave Austin, TX 78705		\$50.00	 	
				(If travel outside of	Texas, complete Schedule T)	
\vdash	Principal occup	Leation / Job title (See Instructions)	Employer (See In	<u></u>		

POLITICAL CONTRIBUTIONS OTHER THAN DIEDGES OR LOANS

SCHEDULE A

OTHER THAN PELBULS ON EDANS					
The Instruct	ION GUIDE explains how to complete this form.	1 PAGE # Schedule: 35/35 Report: 39/56			
2 FILER NAME	Tovo, Kathryne (Ms.)	3 ACCOUNT # (Ethics Commission filers) 00005000			
4 Date	5 Full name of contributor ut-of-state PAC (ID# Young, Linda (Ms.)	7 Amount of 8 In-kind contribution contribution (\$) description (if applicable)			
10/06/2014	6 Contributor address; City; State; Zip Code 7000 Timarou Terrace Austin, TX 78754	\$350.00			
		(If travel outside of Texas, complete Schedule T)			
9 Principal occu Consultant	pation / Job title (See Instructions)	10 Employer (See Instructions) Austin Community College District			

POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Advertising Expense Accounting/Banking Consulting Expense Gifts/Awards/Memorial Expense Legal Services Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Travel In District Contributions/Donations Made By Candidate/Officeholder/Political Committee Food/Beverage Expense Travel Out Of District Event Expense Polling Expense Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) The INSTRUCTION GUIDE explains how to complete this form. 1 PAGE# 2 FILER NAME 3 ACCOUNT # (TEC filers) Tovo, Kathryne (Ms.) Schedule: 1/17 Report: 40/56 00005000 4 Date 5 Payee name 10/01/2014 **Bouldin Creek Neighborhood Association** 6 Amount (\$) Payee address City; State; Zip Code 904 Ebony St Austin, TX 78704 \$280.00 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 Political Advertising **PURPOSE** Advertising Expense OF EXPENDITURE Check If Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 09/29/2014 Butts, David (Mr.) City; State; Zip Code Amount (\$) Pavee address 1914 Patton Ln \$800.00 Austin, TX 78723 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description **PURPOSE** Political consulting Salaries/Wages/Contract Labor OF EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Payee name Date Chez Zee 09/29/2014 Amount (\$) Payee address City; State; Zip Code 5406 Balcones Dr \$500.00 Austin, TX 78731 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Campaign event venue rental **Event Expense** OF EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office held: Complete ONLY if Office sought: direct expenditure to benefit C/OH Payee name Date 10/17/2014 Chez Zee Amount (\$) Pavee address City: State: Zip Code 5406 Balcones Dr \$1,200.20 Austin, TX 78731 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) Women's Luncheon event food, beverage and **PURPOSE Event Expense** services EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought: Office held: Complete ONLY if direct expenditure to benefit C/OH

POLITIC	AL EXPENDITURES	SCHEDULE F		
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Fees Finiting Expense Food/Beverage Expense Food/Beverage Finiting Expense Food/Beverage				
1 PAGE# Schedule: 2/17 F	eport: 41/56 2 FILER NAME Tovo, Kathryne (Ms.)	3 ACCOUNT # (TEC filers) 00005000		
4 Date 10/17/2014	5 Payee name Cricket Wireless			
6 Amount (\$) \$68.34	7 Payee address City: State; Zip Code 8617 Research Blvd Ste 220 Austin, TX 78758			
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) Campaign phone services 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 10/01/2014	Payee name Dahl-Stamnes, Erika (Ms.)			
Amount (\$) \$264.00	Payee address City; State; Zip Code 10900 Research Blvd #1600 Austin, TX 78759			
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) Contract labor for campaign services Check if Austin, TX, officeholder !!ving expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:		
Date 10/15/2014	Payee name Dahl-Stamnes, Erika (Ms.)			
Amount (\$) \$288.00	Payee address City; State; Zip Code 10900 Research Blvd #1600 Austin, TX 78759			
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) Contract labor for campaign services Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:		
Date 10/01/2014	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) Salary for campaign services Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:		

Complete ONLY if

direct expenditure to benefit C/OH

Candidate / Officeholder name

Texas Ethics Commission POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Gifts/Awards/Memorial Expense Legal Services Advertising Expense Accounting/Banking Consulting Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Travel In District Travel Out Of District Contributions/Donations Made By Candidate/Officeholder/Political Committee Food/Beverage Expense Event Expense Polling Expense Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) Fees The Instruction Guide explains how to complete this form. 1 PAGE# 2 FILER NAME 3 ACCOUNT # (TEC filers) Tovo, Kathryne (Ms.) Schedule: 3/17 Report: 42/56 00005000 5 Payee name De Los Santos, Drew (Ms.) 10/15/2014 6 Amount (\$) Payee address City; State; Zip Code 2601 Parker Ln \$1,450.00 Unit A Austin, TX 78701 (If travel outside of Texas, complete Schedule T) (a) Category (See Categories listed at the top of this schedule) (b) Description 8 PURPOSE Salary for campaign services Salaries/Wages/Contract Labor EXPENDITURE Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name DeMayo Cellular 10/07/2014 Amount (\$) Payee address City; State; Zip Code 3807 N I-35 \$164.92 Austin, TX 78722 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Campaign phones Office Overhead/Rental Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Pavee name Facebook, Inc. 09/30/2014 Payee address City; State; Zip Code Amount (\$) 1601 Willow Road \$14.98 Menlo Park, CA 94025 Description Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) PURPOSE Political advertising Advertising Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office held: Complete ONLY if Office sought: direct expenditure to benefit C/OH Date Рауее пате Facebook, Inc. 10/16/2014 Pavee address City; State; Zip Code Amount (\$) 1601 Willow Road \$24.97 Menlo Park, CA 94025 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) Political Advertising **PURPOSE** Advertising Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense

Office held:

Office sought:

P.O.Box 12070

Candidate / Officeholder name

direct expenditure to benefit C/OH

POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Advertising Expense Accounting/Banking Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Salaries/Wages/Contract Labor Solicitation/Fundralsing Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Travel In District Travel Out Of District Contributions/Donations Made By Candidate/Officeholder/Political Committee Consulting Expense Event Expense Polling Expense OTHER (enter a category not listed above) Printing Expense Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. 2 FILER NAME 3 ACCOUNT # (TEC filers) 1 PAGE# Tovo, Kathryne (Ms.) Schedule: 4/17 Report: 43/56 00005000 Payee name 4 Date Forsythe, Chandler (Mr.) 10/01/2014 6 Amount (\$) Payee address City; State; Zip Code 201 E. 21st W0305 Austin, TX 78705 \$88.00 (If travel outside of Texas, complete Schedule T) (a) Category (See Categories listed at the top of this schedule) (b) Description Contract Labor for campaign services **PURPOSE** Salaries/Wages/Contract Labor OF EXPENDITURE Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure Date Payee name 10/15/2014 Forsythe, Chandler (Mr.) City; State; Zip Code Amount (\$) Pavee address 201 E. 21st W0305 \$88.00 Austin, TX 78705 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) PURPOSE Contract labor for campaign services Salaries/Wages/Contract Labor OF EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Pavee name Date Griffith Descendants, LLC 10/01/2014 Amount (\$) Payee address City; State; Zip Code 3536 Bee Caves Rd \$2,780.00 #310 Austin, TX 78746 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) Campaign office rent **PURPOSE** Office Overhead/Rental Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office held: Complete ONLY if Office sought: direct expenditure to benefit C/OH Date Payee name 10/01/2014 Haule, Margaret (Ms.) Amount (\$) Pavee address City: State: Zip Code 3405 Texas Topaz Dr. \$231.00 Austin, TX 78728 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Contact labor for campaign services Salaries/Wages/Contract Labor EXPENDITURE Check If Austin, TX, officeholder living expense Complete ONLY if

Office held:

Office sought:

Texas Ethics Commission

POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Advertising Expense Accounting/Banking Consulting Expense Gifts/Awards/Memorial Expense Legal Services Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Food/Beverage Expense Travel In District Travel Out Of District Contributions/Donations Made By Candidate/Officeholder/Political Committee Event Expense Polling Expense Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) Fees The Instruction Guide explains how to complete this form. 3 ACCOUNT # (TEC filers) 2 FILER NAME 1 PAGE# Tovo, Kathryne (Ms.) 00005000 Schedule: 5/17 Report: 44/56 5 Payee name 4 Date Haule, Margaret (Ms.) 10/15/2014 6 Amount (\$) Payee address City; State; Zip Code 3405 Texas Topaz Dr. Austin, TX 78728 \$360.00 (b) Description (If travel outside of Texas, complete Schedule T) (a) Category (See Categories listed at the top of this schedule) Contact labor for campaign services **PURPOSE** Salaries/Wages/Contract Labor OF EXPENDITURE Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Hughes, William (Mr.) 10/01/2014 Payee address City: State; Zip Code Amount (\$) \$1,650.00 1009 Hillside Oaks Dr. Austin, TX 78745 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description **PURPOSE** Salary for campaign services Salaries/Wages/Contract Labor EXPENDITURE Check if Austin, TX, officeholder living expense Office sought: Candidate / Officeholder name Office held: Complete ONLY if direct expenditure to benefit C/OH Payee name Date Hughes, William (Mr.) 10/15/2014 Amount (\$) Payee address City; State; Zip Code 1009 Hillside Oaks Dr. \$1,650.00 Austin, TX 78745 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description **PURPOSE** Salary for campaign services Salaries/Wages/Contract Labor OF EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Kiolbassa, Jolene (Ms.) 10/01/2014 Payee address Amount (\$) City; State; Zip Code 3007 West Ave \$1,250.00 Austin, TX 78705 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Salary for campaign services Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH

P.O.Box 12070

POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Advertising Expense Accounting/Banking Gifts/Awards/Memorial Expense Legal Services Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Food/Beverage Expense Consulting Expense Event Expense Travel In District Travel Out Of District Contributions/Donations Made By Candidate/Officeholder/Political Committee Polling Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) Printing Expense The Instruction Guide explains how to complete this form. 2 FILER NAME 3 ACCOUNT # (TEC filers) 1 PAGE# Tovo, Kathryne (Ms.) 00005000 Schedule: 6/17 Report: 45/56 4 Date 5 Payee name 10/15/2014 Kiolbassa, Jolene (Ms.) City; State; Zip Code 6 Amount (\$) Payee address 3007 West Ave \$1,250,00 Austin, TX 78705 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 **PURPOSE** Contact Labor for campaign services Salaries/Wages/Contract Labor OF EXPENDITURE Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 10/15/2014 Lines, Travis (Mr.) Amount (\$) Payee address City; State; Zip Code 3701 Turtlecreek Blvd \$412.50 Apt 9F Dallas, TX 75219 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) **PURPOSE** Contract labor for campaign services Salaries/Wages/Contract Labor OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Payee name Date Minguell, Tomas (Mr.) 10/01/2014 Amount (\$) Payee address City; State; Zip Code 2614 Canterbury \$253.00 Austin, TX 78759 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Contract labor for campaign services Salaries/Wages/Contract Labor OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 10/15/2014 Minguell, Tomas (Mr.) Amount (\$) Payee address City; State; Zip Code 2614 Canterbury \$216.00 Austin, TX 78759 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description **PURPOSE** Contact labor for campaign services Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH

Texas Ethics Commission

SCHEDULE F POLITICAL EXPENDITURES **EXPENDITURE CATEGORIES** Advertising Expense Accounting/Banking Consulting Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Travel In District Travel Out Of District Contributions/Donations Made By Candidate/Officeholder/Political Committee Event Expense Polling Expense Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) Fees The Instruction Guide explains how to complete this form. 1 PAGE# 2 FILER NAME 3 ACCOUNT # (TEC filers) Tovo, Kathryne (Ms.) Schedule: 7/17 Report: 46/56 00005000 5 Payee name 4 Date **Net Victories** 10/22/2014 6 Amount (\$) Payee address City; State; Zip Code 4203 Montrose Blvd \$48.00 Suite 350 Houston, TX 77006 (If travel outside of Texas, complete Schedule T) 8 (a) Category (See Categories listed at the top of this schedule) (b) Description **PURPOSE** Campaign email services Advertising Expense EXPENDITURE Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 10/24/2014 **Net Victories** Amount (\$) Payee address City; State; Zip Code 4203 Montrose Blvd \$58.80 Suite 350 Houston, TX 77006 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description **PURPOSE** Campaign email services Advertising Expense OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Pavee name Date Office Max 09/30/2014 Amount (\$) Payee address City; State; Zip Code 4615 North Lamar Blvd \$97.41 Austin, TX 78756 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) Campaign office supplies - toner PURPOSE Office Overhead/Rental Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office held: Complete ONLY if Office sought: direct expenditure to benefit C/OH Date Payee name Office Max 10/09/2014 Amount (\$) Pavee address City: State: Zip Code 4615 North Lamar Blvd \$13.52 Austin, TX 78756 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) Campaign office supplies - paper **PURPOSE** Office Overhead/Rental Expense EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought: Office held: Complete ONLY if direct expenditure to benefit C/OH

to benefit C/OH

POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Gifts/Awards/Memorial Expense Advertising Expense Accounting/Banking Consulting Expense Legal Services Travel In District Travel Out Of District Contributions/Donations Made By Candidate/Officeholder/Political Committee Food/Beverage Expense Event Expense Polling Expense Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) Fees The INSTRUCTION GUIDE explains how to complete this form. 1 PAGE# 2 FILER NAME 3 ACCOUNT # (TEC filers) Tovo, Kathryne (Ms.) Schedule: 8/17 Report: 47/56 00005000 Date 5 Payee name 10/10/2014 Office Max 6 Amount (\$) Pavee address City; State; Zip Code 4615 North Lamar Blvd \$197.52 Austin, TX 78756 Description (If travel outside of Texas, complete Schedule T) Campaign office supplies - toner, paper 8 (a) Category (See Categories listed at the top of this schedule) (b) Description **PURPOSE** Office Overhead/Rental Expense EXPENDITURE Check If Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 10/12/2014 Office Max Amount (\$) Payee address City; State; Zip Code 4615 North Lamar Blvd Austin, TX 78756 \$181.84 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) Campaign office supplies - toner, paper PURPOSE Office Overhead/Rental Expense ΩE **EXPENDITURE** Check if Austin, TX, officeholder living expense Office sought: Complete ONLY if Candidate / Officeholder name Office held: direct expenditure to benefit C/OH Date Pavee name Office Max 10/15/2014 Payee address City; State; Zip Code Amount (\$) 4615 North Lamar Blvd \$184.00 Austin, TX 78756 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description **PURPOSE** Color toner supplies Office Overhead/Rental Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Payee name Date 10/18/2014 Office Max Pavee address City: State: Amount (\$) Zip Code 4615 North Lamar Blvd \$95.25 Austin, TX 78756 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** Campaign office supplies - toner, labels Office Overhead/Rental Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure

POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Advertising Expense Accounting/Banking Consulting Expense Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Travel In District Travel Out Of District Polling Expense Printing Expense Event Expense OTHER (enter a category not listed above) Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. 2 FILER NAME 3 ACCOUNT # (TEC filers) 1 PAGE# Tovo, Kathryne (Ms.) 00005000 Schedule: 9/17 Report: 48/56 5 Payee name 4 Date Office Max 10/20/2014 6 Amount (\$) Payee address City; State; Zip Code 4615 North Lamar Blvd Austin, TX 78756 \$110.39 Description (If travel outside of Texas, complete Schedule T) Campaign office supplies - toner, pins, seals 8 (a) Category (See Categories listed at the top of this schedule) (b) Description **PURPOSE** Office Overhead/Rental Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Office Max 10/20/2014 Amount (\$) Payee address City; State; Zip Code 4615 North Lamar Blvd \$9.74 Austin, TX 78756 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Campaign copy services Office Overhead/Rental Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Pavee name Date Piryx, Inc. 10/25/2014 Amount (\$) Payee address City; State; Zip Code 144 2nd St. 1st floor \$471.41 San Francisco, CA 94105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Cumulative donation processing fees for reporting Fees OF EXPENDITURE period Check if Austin, TX, officeholder living expense Office held: Complete ONLY if Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH Date Payee name 09/26/2014 Rindy & Associates, Inc. Payee address City; State; Zip Code Amount (\$) 2401 East 6th Street #1003 \$8,744,23 Austin, TX 78702 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description **PURPOSE** Political Advertising Advertising Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought: Office held: Complete ONLY if direct expenditure to benefit C/OH

Texas Ethics Commission

POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Advertising Expense Accounting/Banking Consulting Expense Gifts/Awards/Memorial Expense Legal Services Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Travel In District Travel Out Of District Contributions/Donations Made By Candidate/Officeholder/Political Committee Food/Beverage Expense Event Expense Polling Expense OTHER (enter a category not listed above) Printing Expense Office Overhead/Rental Expense Fees The INSTRUCTION GUIDE explains how to complete this form. 2 FILER NAME 3 ACCOUNT # (TEC filers) 1 PAGE# Tovo, Kathryne (Ms.) Schedule: 10/17 Report: 49/56 00005000 4 Date Pavee name Rindy & Associates, Inc. 10/02/2014 6 Amount (\$) Payee address City; State; Zip Code 2401 East 6th Street #1003 Austin, TX 78702 \$1,519.46 Description (If travel outside of Texas, complete Schedule T) Political Advertising (b) Description (a) Category (See Categories listed at the top of this schedule) 8 **PURPOSE** Advertising Expense OF **EXPENDITURE** Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Rindy & Associates, Inc. 10/15/2014 Amount (\$) Pavee address City; State; Zip Code 2401 East 6th Street #1003 \$1,898.00 Austin, TX 78702 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description **PURPOSE** Political advertising Advertising Expense OF **EXPENDITURE** Check If Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Pavee name Rindy & Associates, Inc. 10/15/2014 Amount (\$) Payee address City; State; Zip Code 2401 East 6th Street #1003 \$2,398,00 Austin, TX 78702 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) Political advertising **PURPOSE** Advertising Expense OF EXPENDITURE Check If Austin, TX, officeholder living expense Candidate / Officeholder name Office held: Complete ONLY if Office sought: direct expenditure to benefit C/OH Date Payee name Rindy & Associates, Inc. 10/20/2014 Pavee address City: State: Zip Code Amount (\$) 2401 East 6th Street #1003 \$17,928.00 Austin, TX 78702 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) Political Advertising **PURPOSE** Advertising Expense EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought: Office held: Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name

Complete ONLY if

direct expenditure to benefit C/OH

POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Advertising Expense Accounting/Banking Consulting Expense Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Travel In District Travel Out Of District Polling Expense Printing Expense Event Expense OTHER (enter a category not listed above) Office Overhead/Rental Expense Fees The Instruction Guide explains how to complete this form. 3 ACCOUNT # (TEC filers) 1 PAGE# 2 FILER NAME Tovo, Kathryne (Ms.) 00005000 Schedule: 11/17 Report: 50/56 4 Date 5 Payee name 10/20/2014 San Antonio Garage 6 Amount (\$) Payee address City; State; Zip Code 2420 San Antonio Street Austin, TX 78705 \$15.00 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) PURPOSE Parking fees Transportation Equipment & Related Expense OF **EXPENDITURE** Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Payee name Date 10/13/2014 South Austin Democrats Payee address City; State; Zip Code Amount (\$) P.O. Box 152592 Austin, TX 78715 \$55.00 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE Event sponsorship Contributions/Donations Made By OF Candidate/Officeholder/Political Committee **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Payee name Date Staples 10/03/2014 Amount (\$) Payee address State; Zip Code 1201 Barbara Jordan Blvd. \$259.77 Suite 700 Austin, TX 78723 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) Campaign office supplies - toner **PURPOSE** Office Overhead/Rental Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Payee name Date Staples 10/07/2014 City: State: Zip Code Amount (\$) Payee address 1201 Barbara Jordan Blvd. \$93.08 Suite 700 Austin, TX 78723 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description **PURPOSE** Campaign office supplies - toner Office Overhead/Rental Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense

Office held:

Office sought:

POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Advertising Expense Accounting/Banking Consulting Expense Gifts/Awards/Memorial Expense Legal Services Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Travel In District Contributions/Donations Made By Candidate/Officeholder/Political Committee Food/Beverage Expense Travel Out Of District Event Expense Polling Expense OTHER (enter a category not listed above) Printing Expense Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. 2 FILER NAME 3 ACCOUNT # (TEC filers) 1 PAGE# Tovo, Kathryne (Ms.) 00005000 Schedule: 12/17 Report: 51/56 5 Payee name A Date Taco Shack 09/27/2014 6 Amount (\$) Payee address City; State; Zip Code 2825 Guadalupe St Austin, TX 78705 \$21.31 (If travel outside of Texas, complete Schedule T) (a) Category (See Categories listed at the top of this schedule) (b) Description **PURPOSE** Breakfast for campaign workers Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Payee name Date Taco Shack 10/04/2014 Amount (\$) Payee address City; State; Zip Code 2825 Guadalupe St \$44.57 Austin, TX 78705 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** Breakfast for campaign workers Food/Beverage Expense OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office held: Office sought: direct expenditure to benefit C/OH Date Payee name Taco Shack 10/04/2014 Amount (\$) Payee address City; State; Zip Code 4002 N. Lamar \$27.13 Austin, TX 78757 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description **PURPOSE** Breakfast for campaign workers Food/Beverage Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 10/11/2014 Taco Shack Payee address City; State; Zip Code Amount (\$) 2825 Guadalupe \$58.13 Austin, TX 78705 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Breakfast for campaign workers Food/Beverage Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH

POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Advertising Expense Accounting/Banking Consulting Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Travel In District Travel Out Of District Contributions/Donations Made By Candidate/Officeholder/Political Committee Event Expense Polling Expense Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) The INSTRUCTION GUIDE explains how to complete this form. 3 ACCOUNT # (TEC filers) 1 PAGE# 2 FILER NAME Tovo, Kathryne (Ms.) 00005000 Schedule: 13/17 Report: 52/56 Date 5 Payee name Taco Shack 10/18/2014 6 Amount (\$) Payee address City; State; Zip Code 2825 Guadalupe Austin, TX 78705 \$42.63 (If travel outside of Texas, complete Schedule T) (a) Category (See Categories listed at the top of this schedule) (b) Description **PURPOSE** Breakfast for campaign workers Food/Beverage Expense OF **EXPENDITURE** Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Payee name Date Taco Shack 10/25/2014 Amount (\$) Payee address City; State; Zip Code 2825 Guadalupe St \$14.69 Austin, TX 78705 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) Breakfast for campaign workers **PURPOSE** Food/Beverage Expense OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought: Office held: Complete ONLY if direct expenditure to benefit C/OH Date Payee name The Maids 10/16/2014 City; State; Zip Code Amount (\$) Pavee address 8514 Cameron Rd \$94.18 Austin, TX 78754 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) Campaign office cleaning services **PURPOSE** Office Overhead/Rental Expense EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought: Office held: Complete ONLY if direct expenditure to benefit C/OH Date Payee name Thompson & Knight LLP 09/26/2014 Payee address City; State; Zip Code Amount (\$) 98 San Jacinto Blvd \$455.00 Ste 1900 Austin, TX 78701 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE Legal fees for campaign matters Legal Services OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office held: Office sought: direct expenditure to benefit C/OH

direct expenditure to benefit C/OH

POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Advertising Expense Accounting/Banking Consulting Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Gifts/Awards/Memorial Expense Legal Services Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Contributions/Donations Made By Candidate/Officeholder/Political Committee Food/Beverage Expense Travel Out Of District Event Expense Polling Expense Printing Expense OTHER (enter a category not listed above) Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. 3 ACCOUNT # (TEC filers) 2 FILER NAME 1 PAGE# Tovo, Kathryne (Ms.) 00005000 Schedule: 14/17 Report: 53/56 Date Pavee name Tom Hurt Architecture, Inc. 10/23/2014 6 Amount (\$) Payee address City: State: Zip Code 409 West 14th Street Austin, TX 78701 \$82.50 Description (If travel outside of Texas, complete Schedule T) Contract labor for graphic services (b) Description (a) Category (See Categories listed at the top of this schedule) 8 **PURPOSE** Salaries/Wages/Contract Labor OF EXPENDITURE Check If Austin, TX, officeholder living expense Candidate / Officeholder name Office sought: Office held: 9 Complete ONLY if direct expenditure to benefit C/OH Date Payee name United States Postal Service - North Austin Station 10/07/2014 City: State: Zip Code Amount (\$) Payee address 4300 Speedway Austin, TX 78705 \$980.00 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Postage Advertising Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought: Office held: Complete ONLY if direct expenditure to benefit C/OH Date Pavee name United States Postal Service - North Austin Station 10/08/2014 City; State; Zip Code Amount (\$) Payee address 4300 Speedway Austin, TX 78705 \$490.00 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) Postage PURPOSE Advertising Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Pavee name United States Postal Service - North Austin Station 10/08/2014 Payee address City; State; Zip Code Amount (S) 4300 Speedway Austin, TX 78705 \$490.00 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Postage Advertising Expense EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held:

POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Advertising Expense Accounting/Banking Gifts/Awards/Memorial Expense Legal Services Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Loan Renayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Consulting Expense Food/Beverage Expense Travel In District Travel Out Of District Polling Expense Event Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) Printing Expense The Instruction Guide explains how to complete this form. 2 FILER NAME 3 ACCOUNT # (TEC filers) 1 PAGE# Tovo, Kathryne (Ms.) 00005000 Schedule: 15/17 Report: 54/56 4 Date 5 Payee name 10/09/2014 United States Postal Service - North Austin Station City; State; Zip Code 6 Amount (\$) Payee address 4300 Speedway Austin, TX 78705 \$980.00 (b) Description (If travel outside of Texas, complete Schedule T) (a) Category (See Categories listed at the top of this schedule) 8 **PURPOSE** Postage Advertising Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name United States Postal Service - North Austin Station 10/10/2014 Pavee address City; State; Zip Code Amount (\$) 4300 Speedway Austin, TX 78705 \$980.00 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Postage Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: to benefit C/OH Date Pavee name United States Postal Service - North Austin Station 10/14/2014 City: State; Zip Code Amount (\$) Payee address 4300 Speedway Austin, TX 78705 \$980.00 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Postage Advertising Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Wells Fargo 10/22/2014 Payee address City; State; Zip Code Amount (\$) 501 S Congress Ave \$12.00 Austin, TX 78704 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Bank fee Accounting/Banking OF EXPENDITURE Check If Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH

to benefit C/OH

P.O.Box 12070

POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Advertising Expense Accounting/Banking Consulting Expense Gifts/Awards/Memorial Expense Legal Services Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Food/Beverage Expense Travel In District Travel Out Of District Polling Expense Event Expense OTHER (enter a category not listed above) Printing Expense Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. 2 FILER NAME 3 ACCOUNT # (TEC filers) 1 PAGE# Toyo, Kathryne (Ms.) 00005000 Schedule: 16/17 Report: 55/56 4 Date 5 Payee name Worley Printing Co, Inc. 10/01/2014 6 Amount (\$) Payee address City; State; Zip Code 3217 North IH 35 Austin, TX 78722 \$126.65 (b) Description (If travel outside of Texas, complete Schedule T) (a) Category (See Categories listed at the top of this schedule) Campaign sticker printing PURPOSE Printing Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Worley Printing Co, Inc. 10/15/2014 City; State; Zip Code Amount (\$) Pavee address 3217 North IH 35 Austin, TX 78722 \$1,733.89 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) **PURPOSE** campaign letter printing services Printing Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Pavee name Date Worley Printing Co, Inc. 10/17/2014 Amount (\$) Payee address City: State: Zip Code 3217 North IH 35 \$56.29 Austin, TX 78722 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** Design services for campaign mailing supplies Office Overhead/Rental Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Worley Printing Co, Inc. 10/20/2014 Payee address City; State; Zip Code Amount (\$) 3217 North IH 35 \$169.95 Austin, TX 78722 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Campaign flyer printing **Printing Expense** OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure

P.O.Box 12070

POLITICA	AL EXPENDITURES		SCHEDULE F	
EXPENDITURE CATEGORIES Advertising Expense Gifts/Awards/Memorial Expense Salaries/Wages/Contract_Labor Loan Repayment/Reimbursement				
Advertising Expen Accounting/Bankir Consulting Expens Event Expense Fees	se Gifts/Awards/Memorial Expense Salaries/Wages/C tg Legal Services Solicitation/Fundr se Food/Beverage Expense Travel In District Polling Expense Office Overhead/I The Instruction Guide explains how	Contributions trict Candidate Rental Expense OTHER (ent	ment/Reimbursement on Equipment & Related Expense s/Donations Made By s/Officeholder/Political Committee er a category not listed above)	
1 PAGE#	2 FILER NAME		3 ACCOUNT # (TEC filers)	
Schedule: 17/17 F			00005000	
10/22/2014	5 Payee name Worley Printing Co, Inc.			
6 Amount (\$) \$92.82	7 Payee address City; State; Zip Code 3217 North IH 35 Austin, TX 78722			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	Campaign letter printing		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Check if Austin, TX, officeho	der living expense Office held:	