

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

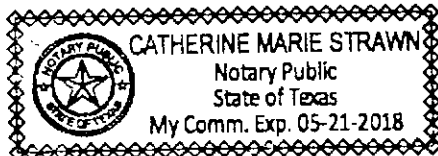
The C/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers) 00000004		2 PAGE # 1 of 15	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Ms. Katrina			OFFICE USE ONLY Date Received	
	NICKNAME LAST SUFFIX Daniel				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE P O Box 15082 Austin, TX 78761-5082			Date Hand-delivered or Date Postmarked	
				Receipt # Amount	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Ms. Carol			Date Processed	
	NICKNAME LAST SUFFIX Huntsberger			Date Imaged	
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #: CITY: STATE: ZIP CODE 4506 Shoal Creek Austin, TX 78756				
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 829-1205				
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input checked="" type="checkbox"/> Final report (Attach C/OH - FR)				
9 PERIOD COVERED	Month Day Year Month Day Year 10/28/2014 THROUGH 01/15/2015				
10 ELECTION	ELECTION DATE Month Day Year 11/04/2014		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) Austin City Council District 4		
GO TO PAGE 2					

 2015 JAN 16 PM 2:48
 AUSTIN CITY CLERK
 RECEIVED

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

13 C/OH NAME Daniel, Katrina (Ms.)		14 ACCOUNT # (Ethics Commission filers) 00000004	
15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> additional pages	.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ...		
	COMMITTEE TYPE	COMMITTEE NAME	
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS	
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
16 CONTRIBUTION TOTALS	1.	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 1,625.00
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4.	TOTAL POLITICAL EXPENDITURES	\$ 27,406.70
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 19,860.45
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

17 AFFIDAVIT

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

K Daniel

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Katrina Daniel, this the 14 day of January, 20 15, to certify which, witness my hand and seal of office.

Catherine Marie Strawn
Signature of officer administering oath

Catherine Marie Strawn
Print name of officer administering oath

Notary Public
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 1/2 Report: 3/15

2 FILER NAME Daniel, Katrina (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00000004

4 Date

10/31/2014

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

6 Contributor address; City; State; Zip Code
507 Highland Hills Circle
Austin, TX 78731

7 Amount of
contribution (\$)

\$100.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
RE

10 Employer (See Instructions)
Endeavor

Date

10/30/2014

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

Contributor address; City; State; Zip Code
5708 Highland Hills Drive
Austin, TX 78731

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Real Estate Development/Brokerage

Employer (See Instructions)
Endeavor Real Estate Group

Date

10/28/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Davidov, Allan & Dean

Contributor address; City; State; Zip Code
433 North Camden Drive
Suite 1177
Beverly Hills, CA 90210

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Member

Employer (See Instructions)
Austin Renaissance GP

Date

10/28/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Davidov, Allan & Dean

Contributor address; City; State; Zip Code
433 North Camden Drive
Suite 1177
Beverly Hills, CA 90210

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Member

Employer (See Instructions)
Austin Renaissance GP

Date

10/29/2014

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

Contributor address; City; State; Zip Code
926 E. 54th St. Unit A
Austin, TX 78751

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Lobbyist

Employer (See Instructions)
Premier Legislative Consulting

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 2/2 Report: 4/15

2 FILER NAME Daniel, Katrina (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00000004

4 Date

10/28/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
McCandless, Patricia III (Mr.)

6 Contributor address; City; State; Zip Code
909 Live Oak Ridge Rd
Austin, TX 78746

7 Amount of
contribution (\$)

\$75.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
Attorney

10 Employer (See Instructions)
Blue Cross Blue Shield

Date

10/29/2014

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

Contributor address; City; State; Zip Code
2908 Sparkling Brook Drive
Austin, TX 78746

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Real Estate

Employer (See Instructions)
Endeavor Real Estate Group

Date

10/31/2014

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

Contributor address; City; State; Zip Code
4009 Madrid Cove
Austin, TX 78759

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

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

Employer (See Instructions)
Endeavor Real Estate Group

LOANS**SCHEDULE E**The **INSTRUCTION GUIDE** explains how to complete this form.**1** PAGE #

Schedule: 1/1 Report: 5/15

2 FILER NAME Daniel, Katrina (Ms.)**3** ACCOUNT # (Ethics Commission filers)

00000004

4

TOTAL OF UNITEMIZED LOANS:

⇔⇔⇔⇔⇔⇔

\$

200.00

5 Date of loan**7** Name of lender☐ out-of-state PAC (ID# _____)**9** Loan Amount (\$)**6** Is lender a
financial Institution?**8** Lender address; City; State; Zip Code**10** Interest rate**11** Maturity date**12** Principal occupation / Job title (See Instructions)**13** Employer (See Instructions)**14** Description of Collateral☐ none**15** Check if personal funds were deposited into political account☐**16** GUARANTOR
INFORMATION**17** Name of guarantor**19** Amount Guaranteed (\$)☐ not applicable**18** Guarantor address; City; State; Zip Code**20** Principal Occupation**21** Employer

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/10 Report: 6/15		2 FILER NAME Daniel, Katrina (Ms.)		3 ACCOUNT # (TEC filers) 00000004	
4 Date 10/28/2014		5 Payee name Ace Printing			
6 Amount (\$) \$649.90		7 Payee address City: State: Zip Code 7807 Doncaster Austin, TX 78745			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> printing and shipping yard signs <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/28/2014		Payee name Azul Strategies			
Amount (\$) \$6,351.99		Payee address City: State: Zip Code 1802 Ann Arbor Austin, TX 78704			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> mailers, robo calls, push cards, chronical ad <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/10/2014		Payee name Azul Strategies			
Amount (\$) \$2,977.68		Payee address City: State: Zip Code 1802 Ann Arbor Austin, TX 78704			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fundraising, sign placement, live calls, lit drop, robo <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 01/13/2015		Payee name Azul Strategies			
Amount (\$) \$5,599.03		Payee address City: State: Zip Code 1802 Ann Arbor Austin, TX 78704			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Walk Shifts Final, Sign Remediation, Party Reimbursement, Fundraising, Admin Closeout <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 2/10 Report: 7/15		2 FILER NAME Daniel, Katrina (Ms.)		3 ACCOUNT # (TEC filers) 00000004	
4 Date 11/02/2014		5 Payee name Brass, Chelsea (Ms.)			
6 Amount (\$) \$1,000.00		7 Payee address City: State: Zip Code 8205 Brettonwoods Lane Austin, TX 78753			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Payroll 10/16/2014 - 10/31/2014 <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/02/2014		Payee name Brass, Chelsea (Ms.)			
Amount (\$) \$300.00		Payee address City: State: Zip Code 8205 Brettonwoods Lane Austin, TX 78753			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Travel In District		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Mileage reimbursement for duration of campaign <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/06/2014		Payee name Brass, Chelsea (Ms.)			
Amount (\$) \$300.00		Payee address City: State: Zip Code 8205 Brettonwoods Lane Austin, TX 78753			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Mileage for duration of campaign - lost check replacement <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/06/2014		Payee name Brass, Chelsea (Ms.)			
Amount (\$) \$1,000.00		Payee address City: State: Zip Code 8205 Brettonwoods Lane Austin, TX 78753			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Payroll for wks 10/16/2014 - 10/31/2014 - lost check replacement <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 3/10 Report: 8/15		2 FILER NAME Daniel, Katrina (Ms.)		3 ACCOUNT # (TEC filers) 00000004	
4 Date 11/12/2014		5 Payee name Brass, Chelsea (Ms.)			
6 Amount (\$) \$2,000.00		7 Payee address City: State: Zip Code 8205 Brettonwoods Lane Austin, TX 78753			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Bonus <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/02/2014		Payee name Facebook			
Amount (\$) \$51.81		Payee address City: State: Zip Code			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Facebook ads <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/10/2014		Payee name Fed Ex			
Amount (\$) \$32.46		Payee address City: State: Zip Code 6406 N I H 35 Austin, TX 78752			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Business Cards <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/10/2014		Payee name Frys			
Amount (\$) \$6.46		Payee address City: State: Zip Code 12707 North Mopac Expressway Austin, TX 78727			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Belkin USB <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 4/10 Report: 9/15		2 FILER NAME Daniel, Katrina (Ms.)		3 ACCOUNT # (TEC filers) 00000004	
4 Date 12/10/2014		5 Payee name H E B			
6 Amount (\$) \$98.00		7 Payee address City; State; Zip Code 1000 E 41st Street Austin, TX 78751			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Stamps <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/31/2014		Payee name Headliners Club			
Amount (\$) \$546.80		Payee address City; State; Zip Code PO Box 97 Austin, TX 78767			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fundraiser Event <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/10/2014		Payee name Louann, McLaughlin			
Amount (\$) \$100.00		Payee address City; State; Zip Code 602 Wilmes Dr Austin, TX 78752			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Yard Signs <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/02/2014		Payee name Martinez, Cristian			
Amount (\$) \$200.00		Payee address City; State; Zip Code 201 E. 21st St M0813R Austin, TX 78705			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Canvassing 10/20/14 - 11/02/2014 <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 5/10 Report: 10/15		2 FILER NAME Daniel, Katrina (Ms.)		3 ACCOUNT # (TEC filers) 00000004	
4 Date 11/12/2014		5 Payee name Martinez, Cristian			
6 Amount (\$) \$180.00		7 Payee address City: State: Zip Code 201 E. 21st St #M0813R Austin, TX 78705			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Canvassing <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/02/2014		Payee name Martinez, Nora			
Amount (\$) \$40.00		Payee address City: State: Zip Code 1300 Crossing Place Apt 0622 Austin, TX 78741			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Canvassing 10/20/14 - 11/2/2014 <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/29/2014		Payee name Northeast Station			
Amount (\$) \$49.00		Payee address City: State: Zip Code 900 Blackson Ave Austin, TX 78752			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Stamps for mailouts <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/12/2014		Payee name Office Depot			
Amount (\$) \$5.19		Payee address City: State: Zip Code 816 Tirado Street Austin, TX 78752			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Hole Punch <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 6/10 Report: 11/15		2 FILER NAME Daniel, Katrina (Ms.)		3 ACCOUNT # (TEC filers) 00000004	
4 Date 11/12/2014		5 Payee name Office Depot			
6 Amount (\$) \$17.30		7 Payee address City: State: Zip Code 816 Tirado Street Austin, TX 78752			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Rubberbands <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/02/2014		Payee name Olivares, Christopher			
Amount (\$) \$420.00		Payee address City: State: Zip Code 3715 Ticonderoga Dr San Antonio, TX 78230			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Canvassing 10/20/2014 - 11/02/2014 <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/12/2014		Payee name Olivares, Christopher			
Amount (\$) \$180.00		Payee address City: State: Zip Code 3715 Ticonderoga Dr San Antonio, TX 78230			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Canvassing <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/06/2014		Payee name Prosperity Bank			
Amount (\$) \$35.00		Payee address City: State: Zip Code 8770 Research Blvd Austin, TX 78758			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fee for a cancelled check <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 7/10 Report: 12/15		2 FILER NAME Daniel, Katrina (Ms.)		3 ACCOUNT # (TEC filers) 00000004	
4 Date 11/04/2014		5 Payee name Quality Seafood			
6 Amount (\$) \$150.42		7 Payee address City: State: Zip Code 5621 Airport Blvd Austin, TX 78751			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Election Watch <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/23/2014		Payee name Quality Seafood			
Amount (\$) \$273.05		Payee address City: State: Zip Code 5621 Airport Blvd Austin, TX 78751			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Kickoff <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/13/2014		Payee name Sophie Rousmaniere and Jay Monton			
Amount (\$) \$750.00		Payee address City: State: Zip Code 8202 Alcorn Circle Austin, TX 78748			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Video of three candidates <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/10/2014		Payee name Staples			
Amount (\$) \$46.30		Payee address City: State: Zip Code 1201 Barbara Jordan Blvd Austin, TX 78723			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Paper, Index Jan-Dec, House of Doolittle Bar Harbor <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 8/10 Report: 13/15		2 FILER NAME Daniel, Katrina (Ms.)		3 ACCOUNT # (TEC filers) 00000004	
4 Date 12/10/2014		5 Payee name Staples			
6 Amount (\$) \$28.68		7 Payee address City: State: Zip Code 1201 Barbara Jordan Blvd Austin, TX 78723			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Calendars <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/10/2014		Payee name Staples			
Amount (\$) \$23.67		Payee address City: State: Zip Code 1201 Barbara Jordan Blvd Austin, TX 78723			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Engineering 36x48 <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/10/2014		Payee name Staples			
Amount (\$) \$6.48		Payee address City: State: Zip Code 1201 Barbara Jordan Blvd Austin, TX 78723			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Posterboard <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/10/2014		Payee name Staples			
Amount (\$) \$79.49		Payee address City: State: Zip Code 1201 Barbara Jordan Blvd Austin, TX 78723			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Month planner, pencils, pens, + other office supplies <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 9/10 Report: 14/15		2 FILER NAME Daniel, Katrina (Ms.)		3 ACCOUNT # (TEC filers) 00000004	
4 Date 12/10/2014	5 Payee name Staples				
6 Amount (\$) \$78.99	7 Payee address City: State: Zip Code 1201 Barbara Jordan Blvd Austin, TX 78723				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Dry Erase board, Markers, Eraser		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 10/28/2014	Payee name Stoneking, Taryn (Ms.)				
Amount (\$) \$240.00	Payee address City: State: Zip Code 2208 Pearl St. #307 Austin, TX 78705				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Payroll 10/20/2014 - 10/26/2014		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 11/02/2014	Payee name Stoneking, Taryn (Ms.)				
Amount (\$) \$300.00	Payee address City: State: Zip Code 2208 Pearl St. #307 Austin, TX 78705				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Mileage for duration of the campaign		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 11/02/2014	Payee name Stoneking, Taryn (Ms.)				
Amount (\$) \$240.00	Payee address City: State: Zip Code 2208 Pearl St. #307 Austin, TX 78705				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Payroll 10/27/2014 - 11/02/2014		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held: