

2014

# 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)

2 Total pages filed:

28 295nc

3 CANDIDATE /  
OFFICEHOLDER  
NAME

MS / MRS / MR

FIRST

MI

NICKNAME

SUFFIX

MS Michael Cole

4 CANDIDATE /  
OFFICEHOLDER  
MAILING  
ADDRESS

ADDRESS / PO BOX:

☐ change of address

4101

5 CANDIDATE/  
OFFICEHOLDER  
PHONE

AREA CODE

(512)

6 CAMPAIGN  
TREASURER  
NAME

MS / MRS / MR

NICKNAME

7 CAMPAIGN  
TREASURER  
ADDRESS  
(residence or business)

STREET ADDRESS

ZIP CODE

5918 E. ...  
Austin TX 78751

8 CAMPAIGN  
TREASURER  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(512) 323-6605

9 REPORT TYPE

- ☒ January 15 ☐ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (officeholder only)  
☐ July 15 ☐ 8th day before election ☐ Exceeded \$500 limit ☐ Final report (Attach C/OH - FR)

12-31-2013

10 PERIOD  
COVERED

Month Day Year

THROUGH

7/15/2013 12/31/2013

11 ELECTION

ELECTION DATE  
Month Day Year

ELECTION TYPE

5/12/2012

☐ Primary ☐ Runoff ☐ General ☐ Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

City Council 6

City Council 6

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2014

# 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)	2 Total pages filed: <b>28 29 30</b>
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <b>Ms Sheryl</b> NICKNAME FIRST <b>Cole</b> LAST MI SUFFIX	<b>OFFICE USE ONLY</b> <b>AUSTIN CITY CLERK RECEIVED</b> <b>2014 JAN 15 PM 1:16</b> Date Received Date Hand-delivered or Postmarked Receipt # Amount Data Processed Data Imaged	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX: <b>4101 Wildwood</b> APT / SUITE #: CITY: STATE: ZIP CODE <input type="checkbox"/> change of address		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE <b>(512)</b> PHONE NUMBER <b>419-1539</b> EXTENSION		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR <b>Joseph</b> NICKNAME FIRST <b>Parker</b> LAST MI SUFFIX		
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE): <b>5918 Lookout Moonham</b> APT / SUITE #: CITY: STATE: ZIP CODE <b>Austin TX 78731</b>		
8 CAMPAIGN TREASURER PHONE	AREA CODE <b>(512)</b> PHONE NUMBER <b>323-6605</b> EXTENSION		
9 REPORT TYPE	<input checked="" 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 type="checkbox"/> Final report (Attach C/OH - FR) <b>12-31-2013</b>		
10 PERIOD COVERED	Month Day Year <b>7/15/2013</b> THROUGH <b>12/31/2013</b>		
11 ELECTION	ELECTION DATE Month Day Year <b>5/12/2012</b> ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special		
12 OFFICE	OFFICE HELD (if any) <b>City Council 6</b>	13 OFFICES SOUGHT (if known) <b>City Council 6</b>	

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# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

14 C/OH NAME

15 ACCOUNT # (Ethics Commission Filers)

16 NOTICE FROM  
POLITICAL  
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

COMMITTEE NAME

☐ GENERAL

COMMITTEE ADDRESS

☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages17 CONTRIBUTION  
TOTALS

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

\$ 0

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

\$ 0

EXPENDITURE  
TOTALS

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

\$ 1,532

4. TOTAL POLITICAL EXPENDITURES

\$ 4,715

CONTRIBUTION  
BALANCE

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

\$ 4,919

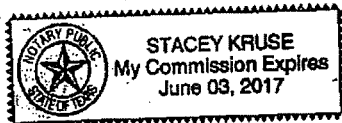
OUTSTANDING  
LOAN TOTALS

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

\$ 0

## 18 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.



AFFIX NOTARY STAMP / SEAL ABOVE

*Sheryl N Cole*  
Signature of Candidate or Officeholder

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

*Stacey Kruse*  
Signature of officer administering oath

Stacey Kruse  
Printed name of officer administering oath

Sheryl N Cole  
Title of officer administering oath

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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 Total pages Schedule F:		2 FILER NAME <i>Sheryl Cole</i>		3 ACCOUNT # (Ethics Commission Filers) <i>00001564</i>	
4 Date <i>2/15</i>		5 Payee name <i>Wendy Davis</i>			
6 Amount (\$) <i>150</i>		7 Payee address; City; State; Zip Code <i>P.O. Box 1039 Fort Worth, TX 76101</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <i>Campaign Contribution</i>		(b) Description (If travel outside of Texas, complete Schedule T) <i>Campaign Contribution</i>	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Sheryl Cole</i>		Office sought Office held	
Date <i>7/18</i>		Payee name <i>ATT</i>			
Amount (\$) <i>137</i>		Payee address; City; State; Zip Code <i>ATT Mob. 1.4 P.O. Box 537104 Atlanta, GA 30353-7104</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Fees</i>		Description (If travel outside of Texas, complete Schedule T) <i>Fees / Office Equipment</i>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Sheryl Cole</i>		Office sought Office held	
Date <i>8/2013</i>		Payee name <i>Pay Pol- Constant Contacts</i>			
Amount (\$) <i>90 61</i>		Payee address; City; State; Zip Code <i>7700 W. Farmer Austin, TX 78729</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Advertising</i>		Description (If travel outside of Texas, complete Schedule T) <i>Newsletter</i>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Sheryl Cole</i>		Office sought Office held	
Date <i>8/2013</i>		Payee name <i>Hoovers</i>			
Amount (\$) <i>108</i>		Payee address; City; State; Zip Code <i>Austin, TX</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Food / Beverage</i>		Description (If travel outside of Texas, complete Schedule T) <i>Food / Beverage</i>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED



~~PAYMENT FROM POLITICAL CONTRIBUTIONS~~  
~~TO A BUSINESS OR C/OH~~

*Schedule C*  
**SCHEDULE H**

*Political Expenditure*

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
 Accounting/Banking  
 Consulting Expense  
 Event Expense  
 Fees

Gift/Awards/Memorials 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 Total pages Schedule H: 2 FILER NAME *Sheryl N Cole* 3 ACCOUNT # (Ethics Commission Filers) *00001564*

4 Date *7/18* 5 Business name *Wendy Davis*

6 Amount (\$) *150* 7 Business address; City; State; Zip Code  
*P.O. Box 1039*  
*Ft Worth, TX 76101*

8 PURPOSE OF EXPENDITURE (a) Category (See categories listed at the top of this schedule) *Campaign Contributions* (b) Description (If travel outside of Texas, complete Schedule T) *Campaign Contributions*

9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date *7/18* Business name *ATT*

Amount (\$) *137* Business address; City; State; Zip Code  
*ATT Mobil. H*  
*P.O. Box 537164*  
*Atlanta GA 30353-7104*

PURPOSE OF EXPENDITURE Category (See categories listed at the top of this schedule) *Fees* Description (If travel outside of Texas, complete Schedule T) *Fees / Office Equipment*

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held  
*Sheryl Cole*

Date *8/04* Business name *Ray Pal Constant Comforts*

Amount (\$) *90.61* Business address; City; State; Zip Code  
*122 Hudson Street*  
*NY, NY 10013*

PURPOSE OF EXPENDITURE Category (See categories listed at the top of this schedule) *Advertising* Description (If travel outside of Texas, complete Schedule T) *Advertising*

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held  
*Sheryl N Cole*

Date *8/12* Business name *South Austin Democrats*

Amount (\$) *25* Business address; City; State; Zip Code  
*P.O. Box 152592*  
*Austin TX 78715*

PURPOSE OF EXPENDITURE Category (See categories listed at the top of this schedule) *Political Contributions* Description (If travel outside of Texas, complete Schedule T) *Political Contributions*

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held  
*Sheryl N Cole*

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# **POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS**

## **SCHEDULE G**

### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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 Total pages Schedule G:	2 FILER NAME <i>Sheryl Cole</i>	3 ACCOUNT # (Ethics Commission Filers) <i>0000 1564</i>
4 Date <i>7/15</i>	5 Payee name <i>Apple Store, Barton Creek</i>	
6 Amount (\$) <i>199</i> <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code <i>2901 S. Capitol Hill TX Hwy Austin, TX 73746</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Office Equipment</i>	(b) Description (If travel outside of Texas, complete Schedule T) <i>Office Expense</i>
Date <i>7/14</i>	Payee name <i>Jay Pol Constant Contacts</i>	
Amount (\$) <i>90.61</i> <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <i>7700 W. Farmer Austin, TX 78729</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Advertising</i>	Description (If travel outside of Texas, complete Schedule T) <i>Advertising</i>
Date <i>7/17</i>	Payee name <i>Staples</i>	
Amount (\$) <i>17.00</i> <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <i>1201 Barbara Jordan Blvd Suite 700 Austin, TX</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Office Supplies</i>	Description (If travel outside of Texas, complete Schedule T) <i>Office Supplies</i>
Date <i>7/2013</i>	Payee name <i>Hyde Park Bar + Grill</i>	
Amount (\$) <i>16.16</i> <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <i>4206 Duval Austin, TX 78751</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Food / Beverage</i>	Description (If travel outside of Texas, complete Schedule T) <i>Food / Beverage</i>

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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.

<b>1</b> Total pages Schedule F:		<b>2</b> FILER NAME <i>Sherry Cole</i>		<b>3</b> ACCOUNT # (Ethics Commission Filers) <i>0000 1564</i>	
<b>4</b> Date <i>8/2013</i>		<b>5</b> Payee name <i>Youth Austin Democrats</i>			
<b>6</b> Amount (\$) <i>25.00</i>		<b>7</b> Payee address; City; State; Zip Code <i>P.O. Box 152592 Austin, TX 78715</i>			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See categories listed at the top of this schedule) <i>Contribution</i>		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <i>Contribution</i>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
<b>Date</b> <i>8/2013</i>		<b>Payee name</b> <i>Travis County Democratic Party - Trio of Women</i>			
<b>Amount (\$)</b> <i>50</i>		<b>Payee address; City; State; Zip Code</b> <i>P.O. Box 684263 Austin, TX 78768</i>			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See categories listed at the top of this schedule) <i>Contribution</i>		<b>Description</b> (If travel outside of Texas, complete Schedule T) <i>Contribution - Awards</i>	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name <i>Sherry N. Cole</i>		Office sought	
<b>Date</b> <i>8/2013</i>		<b>Payee name</b> <i>ATT</i>			
<b>Amount (\$)</b> <i>137</i>		<b>Payee address; City; State; Zip Code</b> <i>ATT Mob. 1.64 P.O. Box 537104 Atlanta GA 30353 - 7104</i>			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See categories listed at the top of this schedule) <i>Fees</i>		<b>Description</b> (If travel outside of Texas, complete Schedule T) <i>Fees / Office Equipment</i>	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name <i>Sherry Cole</i>		Office sought	
<b>Date</b> <i>8/2013</i>		<b>Payee name</b> <i>Eastside Cafe</i>			
<b>Amount (\$)</b> <i>37.20</i>		<b>Payee address; City; State; Zip Code</b> <i>2113 Manor Rd Austin, TX 78722</i>			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See categories listed at the top of this schedule) <i>Food / Beverage</i>		<b>Description</b> (If travel outside of Texas, complete Schedule T) <i>Food / Beverage</i>	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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.

<b>1</b> Total pages Schedule F:	<b>2</b> FILER NAME <i>Sheryl Cole</i>	<b>3</b> ACCOUNT # (Ethics Commission Filers) <i>0000 1564</i>
<b>4</b> Date <i>4/04/2013</i>	<b>5</b> Payee name <i>ME HIC</i>	
<b>6</b> Amount (\$) <i>57.54</i>	<b>7</b> Payee address; City; State; Zip Code <i>507 East Calles Austin, TX 78702</i>	
<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Food/Beverage Expense</i>	(b) Description (If travel outside of Texas, complete Schedule T) <i>Food/Beverage</i>
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date <i>9/1/8</i>	Payee name <i>Eastside Cafe</i>	
Amount (\$) <i>103.44</i>	Payee address; City; State; Zip Code <i>2113 Manor Rd Austin, TX 78722</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Food/Beverage</i>	Description (If travel outside of Texas, complete Schedule T) <i>Food/Beverage</i>
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Sheryl Cole</i>	Office sought      Office held
Date <i>9/2013</i>	Payee name <i>Valva Pritz Campaign for District Clerk</i>	
Amount (\$) <i>350</i>	Payee address; City; State; Zip Code <i>P.O. Box 685008 Austin, TX 78768</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Contribution</i>	Description (If travel outside of Texas, complete Schedule T) <i>Contribution</i>
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Sheryl Cole</i>	Office sought      Office held
Date <i>9/2013</i>	Payee name <i>Craig Watkins Campaign</i>	
Amount (\$) <i>50.00</i>	Payee address; City; State; Zip Code <i>2531 Martin Luther King Jr. Blvd Dallas, TX 75215</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Campaign Contribution</i>	Description (If travel outside of Texas, complete Schedule T) <i>Campaign Contribution</i>
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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.

<b>1</b> Total pages Schedule F:		<b>2</b> FILER NAME <i>Sheryl N. Cole</i>		<b>3</b> ACCOUNT # (Ethics Commission Filers) <i>00001564</i>	
<b>4</b> Date <i>9/30</i>		<b>5</b> Payee name <i>League of Women Voters</i>			
<b>6</b> Amount (\$) <i>100</i>		<b>7</b> Payee address; City; State; Zip Code <i>1011 W. 31st Austin, TX 78705</i>			
<b>8</b> PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <i>Charitable Contribution</i>		(b) Description (If travel outside of Texas, complete Schedule T) <i>Charitable Contribution</i>	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Sheryl N. Cole</i>		Office sought Office held	
Date <i>10/2</i>		Payee name <i>Keep Austin Affordable</i>			
Amount (\$) <i>250</i>		Payee address; City; State; Zip Code <i>(Dissolved)</i>			
<b>PURPOSE OF EXPENDITURE</b>		Category (See categories listed at the top of this schedule) <i>Contribution</i>		Description (If travel outside of Texas, complete Schedule T) <i>Contribution</i>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>10/2013</i>		Payee name <i>Constant Contacts - PayPal</i>			
Amount (\$) <i>90.61</i>		Payee address; City; State; Zip Code <i>7700 W. Parmer Austin TX 78729</i>			
<b>PURPOSE OF EXPENDITURE</b>		Category (See categories listed at the top of this schedule) <i>PayPal/Newsletter</i>		Description (If travel outside of Texas, complete Schedule T) <i>News &amp; Her</i>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Sheryl Cole</i>		Office sought Office held	
Date <i>10/2013</i>		Payee name <i>Eastside Cafe</i>			
Amount (\$) <i>63.03</i>		Payee address; City; State; Zip Code <i>2113 Manor Rd Austin, TX 78722</i>			
<b>PURPOSE OF EXPENDITURE</b>		Category (See categories listed at the top of this schedule) <i>Food Beverage</i>		Description (If travel outside of Texas, complete Schedule T) <i>Food / Beverage</i>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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 Total pages Schedule F:		2 FILER NAME <i>Sheryl Cole</i>		3 ACCOUNT # (Ethics Commission Filers) <i>00001564</i>	
4 Date <i>10/2013</i>		5 Payee name <i>Friends of the MACC</i>			
6 Amount (\$) <i>25<sup>00</sup></i>		7 Payee address; City; State; Zip Code <i>4900 E. Oltorf #216 Austin, TX 78741</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule)		(b) Description (If travel outside of Texas, complete Schedule T)	
		<i>Charitable Contribution</i>		<i>Charitable Contribution</i>	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>10/2013</i>		Payee name <i>TEXAS Democratic Party Victory Committee</i>			
Amount (\$) <i>500<sup>00</sup></i>		Payee address; City; State; Zip Code <i>P.O. Box 684263 Austin, TX 78768</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T)	
		<i>Contribution</i>		<i>Contribution</i>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Sheryl N. Cole</i>		Office sought Office held	
Date <i>10/2013</i>		Payee name <i>US Postal Office</i>			
Amount (\$) <i>63.05</i>		Payee address; City; State; Zip Code <i>4300 Speedway Austin, TX 78705</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T)	
		<i>Advertising</i>		<i>Advertising</i>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Sheryl Cole</i>		Office sought Office held	
Date <i>10/2013</i>		Payee name <i>National Council of Negro Women - Austin Div. 2</i>			
Amount (\$) <i>50<sup>00</sup></i>		Payee address; City; State; Zip Code <i>P.O. Box 143602 Austin, TX 78714</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T)	
		<i>Contribution</i>		<i>Contribution</i>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

## POLITICAL EXPENDITURES

## SCHEDULE F

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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 Total pages Schedule F:	2 FILER NAME <i>Sherry N Cole</i>	3 ACCOUNT # (Ethics Commission Filers) <i>00001564</i>
4 Date <i>10/2013</i>	5 Payee name <i>Foundation Communities</i>	
6 Amount (\$) <i>100</i>	7 Payee address; City; State; Zip Code <i>3036 S 1st St #200 Austin, TX 78704</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Charitable Contribution</i>	(b) Description (If travel outside of Texas, complete Schedule T) <i>Charitable Contribution</i>
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Sherry Cole</i>	Office sought Office held
Date <i>11/2013</i>	Payee name <i>Pay Pal - Constant Contacts</i>	
Amount (\$) <i>90.61</i>	Payee address; City; State; Zip Code <i>7700 W. Parmer Austin TX 78729</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Advertising</i>	Description (If travel outside of Texas, complete Schedule T) <i>Advertising/Newsletter</i>
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Sherry Cole</i>	Office sought Office held
Date <i>11/2013</i>	Payee name <i>Carmino Laredo</i>	
Amount (\$) <i>92.34</i>	Payee address; City; State; Zip Code <i>201 W. 3rd Street Austin, TX 78701</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Food Beverage</i>	Description (If travel outside of Texas, complete Schedule T) <i>Food Beverage</i>
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Sherry Cole</i>	Office sought Office held
Date <i>11/2013</i>	Payee name <i>Mount Sinai</i>	
Amount (\$) <i>100.00</i>	Payee address; City; State; Zip Code <i>5900 Cameron Rd Austin, TX 78723</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Charitable Donation</i>	Description (If travel outside of Texas, complete Schedule T) <i>Charitable Donation</i>
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

## POLITICAL EXPENDITURES

## SCHEDULE F

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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 Total pages Schedule F: 2 FILER NAME *Sherry N. Cole* 3 ACCOUNT # (Ethics Commission Filers) *00001564*

4 Date *11/2013* 5 Payee name *NAA CP*

6 Amount (\$) *15* 7 Payee address; City; State; Zip Code  
*1717 E. 12th Street  
Austin TX 78702*

8 PURPOSE OF EXPENDITURE (a) Category (See categories listed at the top of this schedule) *Charitable Contribution* (b) Description (If travel outside of Texas, complete Schedule T) *Charity*

9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name *Sherry N. Cole* Office sought Office held

Date *11/2013* Payee name *Planned Parenthood*

Amount (\$) *250.00* Payee address; City; State; Zip Code  
*201 E Ben White Blvd  
Austin, TX 78704*

PURPOSE OF EXPENDITURE Category (See categories listed at the top of this schedule) *Charitable Contribution* Description (If travel outside of Texas, complete Schedule T) *Charitable Contribution*

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name *Sherry Cole* Office sought Office held

Date *12/2013* Payee name *Pay Pal - Constant Contracts*

Amount (\$) *90.61* Payee address; City; State; Zip Code  
*7700 W. Farmer  
Austin, TX 78727*

PURPOSE OF EXPENDITURE Category (See categories listed at the top of this schedule) *Advertising* Description (If travel outside of Texas, complete Schedule T) *Newsletter*

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name *Sherry Cole* Office sought Office held

Date *12/2013* Payee name *Earth share*

Amount (\$) *100* Payee address; City; State; Zip Code  
*1301 FH35  
Austin TX 78741*

PURPOSE OF EXPENDITURE Category (See categories listed at the top of this schedule) *Charitable Contribution* Description (If travel outside of Texas, complete Schedule T) *Charitable Contribution*

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED



**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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 Total pages Schedule F:	2 FILER NAME <i>Sherry Cole</i>	3 ACCOUNT # (Ethics Commission Filers) <i>00001569</i>
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4 Date <i>12/2013</i>	5 Payee name <i>Z-TEIAS</i>
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6 Amount (\$) <i>32.78</i>	7 Payee address; City; State; Zip Code <i>110 W. 6th Street Austin TX 78703</i>
-------------------------------	--

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Food Beverage</i>	(b) Description (If travel outside of Texas, complete Schedule T) <i>Food Beverage</i>
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Sherry Cole</i>	Office sought	Office held
---	---	---------------	-------------

Date <i>12/2013</i>	Payee name <i>Black Austin Democrats</i>
------------------------	---

Amount (\$) <i>500</i>	Payee address; City; State; Zip Code <i>P.O. Box 6276 Austin, TX 78762</i>
---------------------------	---

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Political Contribution</i>	Description (If travel outside of Texas, complete Schedule T) <i>Political Contribution</i>
------------------------	---	--

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Sherry Cole</i>	Office sought	Office held
---	---	---------------	-------------

Date	Payee name <i>Carino Laredo</i>
------	------------------------------------

Amount (\$) <i>211.42</i>	Payee address; City; State; Zip Code <i>201 W. 3rd St Austin TX 78701</i>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Food Beverage</i>	Description (If travel outside of Texas, complete Schedule T) <i>Food Beverage</i>
------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Sherry Cole</i>	Office sought	Office held
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Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
---	-------------------------------	---------------	-------------

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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** Total pages Schedule F: **2** FILER NAME **3** ACCOUNT # (Ethics Commission Filers)

**4** Date **5** Payee name

**6** Amount (\$) **7** Payee address; City; State; Zip Code

**8** **PURPOSE OF EXPENDITURE** (a) Category (See categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T)

**9** Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date Payee name

Amount (\$) Payee address; City; State; Zip Code

**PURPOSE OF EXPENDITURE** Category (See categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T)

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date Payee name

Amount (\$) Payee address; City; State; Zip Code

**PURPOSE OF EXPENDITURE** Category (See categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T)

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date Payee name

Amount (\$) Payee address; City; State; Zip Code

**PURPOSE OF EXPENDITURE** Category (See categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T)

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

**LOANS****SCHEDULE E**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E:	
2 FILER NAME		3 ACCOUNT # (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED LOANS:   ⇒   ⇒   ⇒   ⇒   ⇒   ⇒		\$	
5 Date of loan	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	9 Loan Amount (\$)	
6 Is lender a financial institution?  Y    N	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 <input type="checkbox"/> none		15 Check if personal funds were deposited into political account <input type="checkbox"/>	
16 GUARANTOR INFORMATION  <input type="checkbox"/> not applicable	17 Name of guarantor		19 Amount Guaranteed (\$)
	18 Guarantor address;   City;   State;   Zip Code		
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)	
Date of loan	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	Loan Amount (\$)	
Is lender a financial institution?  Y    N	Lender address;   City;   State;   Zip Code	Interest rate	
		Maturity date	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Description of Collateral <input type="checkbox"/> none		Check if personal funds were deposited into political account <input type="checkbox"/>	
GUARANTOR INFORMATION  <input type="checkbox"/> not applicable	Name of guarantor		Amount Guaranteed (\$)
	Guarantor address;   City;   State;   Zip Code		
Principal Occupation (See Instructions)		Employer (See Instructions)	

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
 If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.

**PLEDGED CONTRIBUTIONS****SCHEDULE B**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule B:	
2 FILER NAME		3 ACCOUNT # (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED PLEDGES:      ⇨   ⇨   ⇨   ⇨   ⇨   ⇨		\$	
5 Date	6 Full name of pledgor: <input type="checkbox"/> out-of-state PAC (ID#: _____)	8 Amount of pledge (\$)	9 In-kind description (if applicable)
	7 Pledgor address;      City; State; Zip Code		
		(If travel outside of Texas, complete Schedule T)	
10 Principal occupation / Job title (See Instructions)		11 Employer (See Instructions)	
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of pledge (\$)	In-kind description (if applicable)
	Pledgor address;      City; State; Zip Code		
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of pledge (\$)	In-kind description (if applicable)
	Pledgor address;      City; State; Zip Code		
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of pledge (\$)	In-kind description (if applicable)
	Pledgor address;      City; State; Zip Code		
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of pledge (\$)	In-kind description (if applicable)
	Pledgor address;      City; State; Zip Code		
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of pledge (\$)	In-kind description (if applicable)
	Pledgor address;      City; State; Zip Code		
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME <i>Sheryl Cole</i>		3 ACCOUNT # (Ethics Commission Filers) <i>00001564</i>	
4 Date <i>7/15</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Best Buy</i>	7 Amount of contribution (\$) <i>199</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# 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)		2 Total pages filed:	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI		OFFICE USE ONLY		
	NICKNAME LAST SUFFIX				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> change of address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE		Date Received		
			Date Hand-delivered or Postmarked		
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION ( )		Receipt # Amount		
			Date Processed		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI		Date Imaged		
	NICKNAME LAST SUFFIX				
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE				
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION ( )				
9 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 type="checkbox"/> Final report (Attach C/OH - FR)				
10 PERIOD COVERED	Month / Day / Year    THROUGH    Month / Day / Year				
11 ELECTION	ELECTION DATE Month / Day / Year		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special		
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if known)		
GOTO PAGE 2					

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

14 C/OH NAME

15 ACCOUNT # (Ethics Commission Filers)

16 NOTICE FROM  
POLITICAL  
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE 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

☐ GENERAL☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages17 CONTRIBUTION  
TOTALS

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

\$

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

\$

EXPENDITURE  
TOTALS

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

\$

4. TOTAL POLITICAL EXPENDITURES

\$

CONTRIBUTION  
BALANCE

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

\$

OUTSTANDING  
LOAN TOTALS

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

\$

## 18 AFFIDAVIT

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

\_\_\_\_\_  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME		3 ACCOUNT # (Ethics Commission Filers)	
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)  6 Contributor address; City; State; Zip Code	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)  Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)  Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)  Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)  Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.



**PLEDGED CONTRIBUTIONS****SCHEDULE B**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule B:**2** FILER NAME**3** ACCOUNT # (Ethics Commission Filers)**4** TOTAL OF UNITEMIZED PLEDGES:

⇒ ⇒ ⇒ ⇒ ⇒ ⇒

\$

**5** Date**6** Full name of pledgor☐ out-of-state PAC (ID#: \_\_\_\_\_)**8** Amount of  
pledge (\$)**9** In-kind description  
(if applicable)**7** Pledgor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

**10** Principal occupation / Job title (See Instructions)**11** Employer (See Instructions)

Date

Full name of pledgor

☐ out-of-state PAC (ID#: \_\_\_\_\_)Amount of  
pledge (\$)In-kind description  
(if applicable)

Pledgor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of pledgor

☐ out-of-state PAC (ID#: \_\_\_\_\_)Amount of  
pledge (\$)In-kind description  
(if applicable)

Pledgor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of pledgor

☐ out-of-state PAC (ID#: \_\_\_\_\_)Amount of  
pledge (\$)In-kind description  
(if applicable)

Pledgor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of pledgor

☐ out-of-state PAC (ID#: \_\_\_\_\_)Amount of  
pledge (\$)In-kind description  
(if applicable)

Pledgor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

**LOANS****SCHEDULE E**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E:	
2 FILER NAME		3 ACCOUNT # (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED LOANS:   ⇒   ⇒   ⇒   ⇒   ⇒   ⇒		\$	
5 Date of loan	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	9 Loan Amount (\$)	
6 Is lender a financial institution?  Y    N	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 <input type="checkbox"/> none		15 Check if personal funds were deposited into political account <input type="checkbox"/>	
16 GUARANTOR INFORMATION  <input type="checkbox"/> not applicable	17 Name of guarantor  18 Guarantor address;   City;   State;   Zip Code		19 Amount Guaranteed (\$)
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)	
Date of loan	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	Loan Amount (\$)	
Is lender a financial institution?  Y    N	Lender address;   City;   State;   Zip Code	Interest rate	
		Maturity date	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Description of Collateral <input type="checkbox"/> none		Check if personal funds were deposited into political account <input type="checkbox"/>	
GUARANTOR INFORMATION  <input type="checkbox"/> not applicable	Name of guarantor  Guarantor address;   City;   State;   Zip Code		Amount Guaranteed (\$)
Principal Occupation (See Instructions)		Employer (See Instructions)	

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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.

<b>1</b> Total pages Schedule F:	<b>2</b> FILER NAME	<b>3</b> ACCOUNT # (Ethics Commission Filers)
----------------------------------	---------------------	---

<b>4</b> Date	<b>5</b> Payee name
---------------	---------------------

<b>6</b> Amount (\$)	<b>7</b> Payee address; City; State; Zip Code
----------------------	---

<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
---------------------------------	--	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
-------------	--------------------------------------

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
------------------------	--	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
-------------	--------------------------------------

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
------------------------	--	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
-------------	--------------------------------------

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
------------------------	--	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# **POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS**

## **SCHEDULE G**

### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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.

<b>1</b> Total pages Schedule G:	<b>2</b> FILER NAME	<b>3</b> ACCOUNT # (Ethics Commission Filers)
----------------------------------	---------------------	---

<b>4</b> Date	<b>5</b> Payee name
---------------	---------------------

<b>6</b> Amount (\$)  <input type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code
--	---

<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
---------------------------------	--	---

Date	Payee name
------	------------

Amount (\$)  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code
---	--------------------------------------

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
------------------------	--	---

Date	Payee name
------	------------

Amount (\$)  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code
---	--------------------------------------

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
------------------------	--	---

Date	Payee name
------	------------

Amount (\$)  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code
---	--------------------------------------

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
------------------------	--	---

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# **PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH**

## **SCHEDULE H**

### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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** Total pages Schedule H: **2** FILER NAME **3** ACCOUNT # (Ethics Commission Filers)

**4** Date **5** Business name

**6** Amount (\$) **7** Business address; City; State; Zip Code

**8** **PURPOSE OF EXPENDITURE** (a) Category (See categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T)

**9** Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date Business name

Amount (\$) Business address; City; State; Zip Code

**PURPOSE OF EXPENDITURE** Category (See categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T)

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date Business name

Amount (\$) Business address; City; State; Zip Code

**PURPOSE OF EXPENDITURE** Category (See categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T)

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date Business name

Amount (\$) Business address; City; State; Zip Code

**PURPOSE OF EXPENDITURE** Category (See categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T)

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE I

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule I:	<b>2</b> FILER NAME		<b>3</b> ACCOUNT # (Ethics Commission Filers)
<b>4</b> Date	<b>5</b> Payee name		
<b>6</b> Amount (\$)	<b>7</b> Payee address; City; State; Zip Code		
<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories)	(b) Description (See instructions regarding type of information required.)	
Date	Payee name		
Amount (\$)	Payee address; City; State; Zip Code		
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories)	(b) Description (See instructions regarding type of information required.)	
Date	Payee name		
Amount (\$)	Payee address; City; State; Zip Code		
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories)	(b) Description (See instructions regarding type of information required.)	
Date	Payee name		
Amount (\$)	Payee address; City; State; Zip Code		
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories)	(b) Description (See instructions regarding type of information required.)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**INTEREST EARNED, OTHER CREDITS/GAINS/  
REFUNDS, AND PURCHASE OF INVESTMENTS****SCHEDULE K**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule K:**2** FILER NAME**3** ACCOUNT # (Ethics Commission Filers)**4** Date**5** Name of person from whom amount is received**8** Amount  
(\$)**6** Address of person from whom amount is received; City; State; Zip Code**7** Purpose for which amount is received

Date

Name of person from whom amount is received

Amount  
(\$)

Address of person from whom amount is received; City; State; Zip Code

Purpose for which amount is received

Date

Name of person from whom amount is received

Amount  
(\$)

Address of person from whom amount is received; City; State; Zip Code

Purpose for which amount is received

Date

Name of person from whom amount is received

Amount  
(\$)

Address of person from whom amount is received; City; State; Zip Code

Purpose for which amount is received

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# IN-KIND CONTRIBUTION OR POLITICAL EXPENDITURE FOR TRAVEL OUTSIDE OF TEXAS

## SCHEDULE T

The Instruction Guide explains how to complete this form.		1 Total pages Schedule T: .	
2 FILER NAME		3 ACCOUNT # (Ethics Commission Filers)	
4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee			
5 Contribution / Expenditure reported on: <div style="display: flex; flex-wrap: wrap; justify-content: space-between; padding: 5px 0;"> <div><input type="checkbox"/> Schedule A</div> <div><input type="checkbox"/> Schedule B</div> <div><input type="checkbox"/> Schedule C</div> <div><input type="checkbox"/> Schedule D</div> <div><input type="checkbox"/> Schedule F</div> <div><input type="checkbox"/> Schedule G</div> <div><input type="checkbox"/> Schedule H</div> <div><input type="checkbox"/> Schedule N</div> <div><input type="checkbox"/> COH-UC</div> <div><input type="checkbox"/> COH-T</div> <div><input type="checkbox"/> PAC-C</div> <div><input type="checkbox"/> PAC-E</div> </div>			
6 Dates of travel	7 Name of person(s) traveling		
	8 Departure city or name of departure location		
	9 Destination city or name of destination location		
10 Means of transportation		11 Purpose of travel (including name of conference, seminar, or other event)	
Name of Contributor / Corporation or Labor Organization / Pledgor / Payee			
Contribution / Expenditure reported on: <div style="display: flex; flex-wrap: wrap; justify-content: space-between; padding: 5px 0;"> <div><input type="checkbox"/> Schedule A</div> <div><input type="checkbox"/> Schedule B</div> <div><input type="checkbox"/> Schedule C</div> <div><input type="checkbox"/> Schedule D</div> <div><input type="checkbox"/> Schedule F</div> <div><input type="checkbox"/> Schedule G</div> <div><input type="checkbox"/> Schedule H</div> <div><input type="checkbox"/> Schedule N</div> <div><input type="checkbox"/> COH-UC</div> <div><input type="checkbox"/> COH-T</div> <div><input type="checkbox"/> PAC-C</div> <div><input type="checkbox"/> PAC-E</div> </div>			
Dates of travel	Name of person(s) traveling		
	Departure city or name of departure location		
	Destination city or name of destination location		
Means of transportation		Purpose of travel (including name of conference, seminar, or other event)	
Name of Contributor / Corporation or Labor Organization / Pledgor / Payee			
Contribution / Expenditure reported on: <div style="display: flex; flex-wrap: wrap; justify-content: space-between; padding: 5px 0;"> <div><input type="checkbox"/> Schedule A</div> <div><input type="checkbox"/> Schedule B</div> <div><input type="checkbox"/> Schedule C</div> <div><input type="checkbox"/> Schedule D</div> <div><input type="checkbox"/> Schedule F</div> <div><input type="checkbox"/> Schedule G</div> <div><input type="checkbox"/> Schedule H</div> <div><input type="checkbox"/> Schedule N</div> <div><input type="checkbox"/> COH-UC</div> <div><input type="checkbox"/> COH-T</div> <div><input type="checkbox"/> PAC-C</div> <div><input type="checkbox"/> PAC-E</div> </div>			
Dates of travel	Name of person(s) traveling		
	Departure city or name of departure location		
	Destination city or name of destination location		
Means of transportation		Purpose of travel (including name of conference, seminar, or other event)	
Name of Contributor / Corporation or Labor Organization / Pledgor / Payee			
Contribution / Expenditure reported on: <div style="display: flex; flex-wrap: wrap; justify-content: space-between; padding: 5px 0;"> <div><input type="checkbox"/> Schedule A</div> <div><input type="checkbox"/> Schedule B</div> <div><input type="checkbox"/> Schedule C</div> <div><input type="checkbox"/> Schedule D</div> <div><input type="checkbox"/> Schedule F</div> <div><input type="checkbox"/> Schedule G</div> <div><input type="checkbox"/> Schedule H</div> <div><input type="checkbox"/> Schedule N</div> <div><input type="checkbox"/> COH-UC</div> <div><input type="checkbox"/> COH-T</div> <div><input type="checkbox"/> PAC-C</div> <div><input type="checkbox"/> PAC-E</div> </div>			
Dates of travel	Name of person(s) traveling		
	Departure city or name of departure location		
	Destination city or name of destination location		
Means of transportation		Purpose of travel (including name of conference, seminar, or other event)	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			



**CANDIDATE / OFFICEHOLDER REPORT:  
DESIGNATION OF FINAL REPORT****FORM C/OH - FR**

The Instruction Guide explains how to complete this form.  
-- Complete only if "Report Type" on page 1 is marked "Final Report" --

**1 C/OH NAME****2 ACCOUNT #** (Ethics Commission Filers)**3 SIGNATURE**

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.

\_\_\_\_\_  
Signature of Candidate / Officeholder**4 FILER WHO IS NOT AN OFFICEHOLDER**-- Complete A & B below *only* if you are not an officeholder. --**A. CAMPAIGN FUNDS**

Check only one:

- ☐ I do not have unexpended contributions or unexpended interest or income earned from political contributions.
- ☐ I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.

**B. ASSETS**

Check only one:

- ☐ I do not retain assets purchased with political contributions or interest or other income from political contributions.
- ☐ I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.

\_\_\_\_\_  
Signature of Candidate**5 OFFICEHOLDER**-- Complete this section *only* if you are an officeholder --

- ☐ I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.

\_\_\_\_\_  
Signature of Officeholder

**EXEMPTION STATEMENT**

(To be used only when no electronic filing of a  
Campaign Finance Report (C&E) will be done)

**NAME OF CANDIDATE OR COMMITTEE:**


Cole Sheryl  
(Last) (First) (Middle)

**ADDRESS:** 4101 Wildwood

**DATE OF FILING:** January 15, 2014

**STATEMENT**

I/we, Sheryl Cole (Name of Candidate or Committee), have not raised and do not intend to raise more than \$30,000 in contributions for the campaign period of 1/1, 2013 through 12/31, 2013. Therefore, I/we will not be filing our election contribution and expenditure reports (C&E) electronically. If contributions raised exceed \$30,000, I/we will file subsequent Campaign Finance Reports (C&E) electronically.

  
Signed by Candidate or Campaign Committee

1-15-14  
Date

**NOTE:** The Code requires that if contributions exceed \$30,000, subsequent Campaign Finance Reports (C&E) must be filed electronically.



2014

# 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) 00121212	2 Total pages filed: 4
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI William NICKNAME LAST SUFFIX Bill Spelman	<b>OFFICE USE ONLY</b> Date Received Date Hand-delivered or Postmarked Receipt # Date Processed Date Imaged 2014 JUN 11 PM 3:59 AUSTIN CITY CLERK RECEIVED	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX APT / SUITE # CITY STATE ZIP CODE 301 W 2nd St. Austin, TX 78701		
5 CANDIDATE / OFFICEHOLDER PHONE	PHONE		
6 CAMPAIGN TREASURER NAME	MI SUFFIX		
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STATE ZIP CODE Ste 2800		
8 CAMPAIGN TREASURER PHONE	ON		
9 REPORT TYPE	<input checked="" 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 type="checkbox"/> Final report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year    THROUGH    Month Day Year 07 / 01 / 13    12 / 31 / 13		
11 ELECTION	ELECTION DATE Month Day Year 05 / 12 / 12	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff	
12 OFFICE	OFFICE HELD (if any) Council Member, Place 5	13 OFFICE SOUGHT (if known)	

GOTO PAGE 2

2014

# 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) 00121212	2 Total pages filed: 4
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST MI William NICKNAME LAST SUFFIX Bill Spelman	<b>OFFICE USE ONLY</b> Date Received Date Hand-delivered or Postmarked Receipt # Date Processed Date Imaged 2014 JUN 11 PM 3:59 AUSTIN CITY CLERK RECEIVED	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 301 W 2nd St. Austin, TX 78701		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 974.2256		
6 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST MI Ms. Martha NICKNAME LAST SUFFIX Smiley		
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 600 Congress Ave., Ste. 2800 Austin, TX 78701		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 615.1207		
9 REPORT TYPE	<input checked="" 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 type="checkbox"/> Final report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year    THROUGH    Month Day Year 07 / 01 / 13    12 / 31 / 13		
11 ELECTION	ELECTION DATE    ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Runoff 05 / 12 / 12		
12 OFFICE	OFFICE HELD (if any) Council Member, Place 5	13 OFFICE SOUGHT (if known)	

GO TO PAGE 2

FORM C/OH  
COVER SHEET PG 2

Revised 04/19/2013

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F: 1	<b>2</b> FILER NAME William Spelman	<b>3</b> ACCOUNT # (Ethics Commission Filers) 00121212
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<b>4</b> Date 08/30/2013	<b>5</b> Payee name Spa Reveil
-----------------------------	-----------------------------------

<b>6</b> Amount (\$) \$20.00	<b>7</b> Payee address; City; State; Zip Code 11410 Century Oaks Terrace, Ste. 140 Austin, TX 78758
---------------------------------	---

<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Reimbursement-Barbara Rush	(b) Description (If travel outside of Texas, complete Schedule T) staff retirement gift for Candy Parham Hinkle
---------------------------------	--	--

<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12/9/2013	Payee name Nordstrom, Inc.
-------------------	-------------------------------

Amount (\$) \$50.00	Payee address; City; State; Zip Code 2901 Capital of Texas Highway Austin, TX 78746
------------------------	---

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Reimbursement-Ashley Fisher	Description (If travel outside of Texas, complete Schedule T) staff graduation gift for Nancy Cardenas
------------------------	---	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
---	-------------------------------	---------------	-------------

Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**EXEMPTION STATEMENT**

(To be used only when no electronic filing of a  
Campaign Finance Report (C&E) will be done)

**NAME OF CANDIDATE OR COMMITTEE:**

Spelman William  
(Last) (First) (Middle)

**ADDRESS:** 301 West 2nd St., Austin, TX 78701

**DATE OF FILING:** 1/14/14

**STATEMENT**

I/we, Bill Spelman (Name of Candidate or Committee), have not raised and do not intend to raise more than \$30,000 in contributions for the campaign period of July 1st, 2013 through December 31, 2013. Therefore, I/we will not be filing our election contribution and expenditure reports (C&E) electronically. If contributions raised exceed \$30,000, I/we will file subsequent Campaign Finance Reports (C&E) electronically.

William Spelman  
Signed by Candidate or Campaign Committee

14 JANUARY 2014  
Date

NOTE: The Code requires that if contributions exceed \$30,000, subsequent Campaign Finance Reports (C&E) must be filed electronically.



2014

# 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) 0000500	2 Total pages filed 2014 JAN 13 PM 1 27 OFFICE USE ONLY AUSTIN CITY CLERK RECEIVED
3 CANDIDATE / OFFICEHOLDER NAME	<input checked="" type="radio"/> MS / MRS / MR FIRST MI Kathryne B NICKNAME LAST SUFFIX Kathie TOVO		Date Received
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX, APT / SUITE #, CITY, STATE, ZIP CODE 809 West 32nd St Austin Tx 78705		Date Hand-delivered Postmarked
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 565 5361		Receipt # Amount
6 CAMPAIGN TREASURER NAME	<input checked="" type="radio"/> MS / MRS / MR FIRST MI Joseph NICKNAME LAST SUFFIX Pinnelli		Date Processed
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX) P.O. Box		CODE 8763
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE (512) 478-		
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> <input type="checkbox"/> July 15 <input type="checkbox"/>		th day after campaign asurer appointment ficeholder only) al report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year 7 / 1 / 201		12 / 31 / 2013
11 ELECTION	ELECTION DATE Month Day Year / /		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special
12 OFFICE	OFFICE HELD (if any) City Council Place 3		13 OFFICE SOUGHT (if known) N/A

GO TO PAGE 2

# 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) 0000500	2 Total pages filed: 2011 JUN 13 PM 1 07 AUSTIN CITY CLERK RECEIVED
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI	OFFICE USE ONLY	
	NICKNAME LAST SUFFIX	Date Received	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE	Date Hand-delivered Postmarked	
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION	Receipt # Amount	
	MS / MRS (MR) FIRST MI	Date Processed	
6 CAMPAIGN TREASURER NAME	NICKNAME LAST SUFFIX	Date Imaged	
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION		
9 REPORT TYPE	<input checked="" 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 type="checkbox"/> Final report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year    THROUGH    Month Day Year 7 / 1 / 2013    12 / 31 / 2013		
11 ELECTION	ELECTION DATE Month Day Year / /	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)	
	City Council Place 3	N/A	

GO TO PAGE 2

# **CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS**

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

14 C/OH NAME

Kathryne B. Tovo

15 ACCOUNT # (Ethics Commission Filers)

0000500

16 NOTICE FROM  
POLITICAL  
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

COMMITTEE NAME

☐ GENERAL

COMMITTEE ADDRESS

☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages17 CONTRIBUTION  
TOTALS

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

\$ .00

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

\$ .00

EXPENDITURE  
TOTALS

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

\$ .00

4. TOTAL POLITICAL EXPENDITURES

\$ 1,912.00

CONTRIBUTION  
BALANCE

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

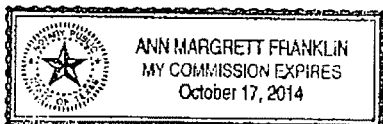
\$ .00

OUTSTANDING  
LOAN TOTALS

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

\$ 61,807.06

18 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 B. Tovo  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Kathryne B. Tovo, this the 13 day of January, 20 14, to certify which, witness my hand and seal of office.

Ann Margaret Franklin  
Signature of officer administering oath

Ann Margaret Franklin  
Printed name of officer administering oath

Notary Public  
Title of officer administering oath

# **POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS**

## **SCHEDULE G**

### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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 Total pages Schedule G:		2 FILER NAME <i>Kathryne B. Tovo</i>		3 ACCOUNT # (Ethics Commission Filers) <i>00005 000</i>	
4 Date <i>12/9/13</i>		5 Payee name <i>South Austin Democrats</i>			
6 Amount (\$) <i>\$62</i> <input type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code <i>P.O. Box 152592 Austin Tx 78715-2592</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <i>fees</i>		(b) Description (If travel outside of Texas, complete Schedule T) <i>membership renewal</i>	
Date <i>9/5/13</i>		Payee name <i>South Austin Democrats</i>			
Amount (\$) <i>\$50</i> <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code <i>P.O. Box 152592 Austin Tx 78715-2592</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>event expense</i>		Description (If travel outside of Texas, complete Schedule T) <i>sponsorship</i>	
Date <i>8/30/13</i>		Payee name <i>Save Our Springs</i>			
Amount (\$) <i>\$100</i> <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code <i>905 West Oltorf Austin, Tx 78705</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>donation</i>		Description (If travel outside of Texas, complete Schedule T)	
Date <i>7/3/13</i>		Payee name <i>Thompson and Knight LLP</i>			
Amount (\$) <i>\$1,700</i> <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code <i>98 San Jacinto Blvd. Suite 1900 Austin Tx 78701</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>legal services</i>		Description (If travel outside of Texas, complete Schedule T) <i>assistance with required financial forms</i>	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

**EXEMPTION STATEMENT**

(To be used only when no electronic filing of a  
Campaign Finance Report (C&E) will be done)

**NAME OF CANDIDATE OR COMMITTEE:**

Tovo Kathryne B -  
(Last) (First) (Middle)

**ADDRESS:** 809 West 32nd St Austin Tx 78705

**DATE OF FILING:** 13  
1 - 12 - 2014

**STATEMENT**

I/we, Kathryne Tovo (Name of Candidate or Committee), have not raised and do not intend to raise more than \$30,000 in contributions for the campaign period of July 1, 2013 through December 31, 2013. Therefore, I/we will not be filing our election contribution and expenditure reports (C&E) electronically. If contributions raised exceed \$30,000, I/we will file subsequent Campaign Finance Reports (C&E) electronically.

Kathryne B Tovo  
Signed by Candidate or Campaign Committee

1-12-14  
Date

NOTE: The Code requires that if contributions exceed \$30,000, subsequent Campaign Finance Reports (C&E) must be filed electronically.

2013

**Apparently, former Council Member Chris Riley did NOT file ANY of the campaign report forms for the second half of 2012 which were to be filed with the City Clerk by January 15, 2013. No report from Riley is shown on the City's webpage for January 15, 2013.**

2013

# **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) <b>00999999</b>	2 Total pages filed: <b>4</b>
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST <b>LEE</b> NICKNAME <b>LEFFINGWELL</b> LAST SUFFIX	OFFICE USE ONLY Date Received <b>2013 JAN 15 PM 11 47</b> Date Hand-delivered or Postmarked Receipt # Amount Date Processed Date Imaged	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <b>4516 Balcones Drive Austin, TX 78731</b>		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION <b>(512) 422-6150</b>		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI <b>Katheryn</b> NICKNAME LAST SUFFIX <b>Kitty Clark</b>		
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO ZIP CODE <b>4308 Austin</b>		
8 CAMPAIGN TREASURER PHONE	AREA CODE <b>(512) 4</b>		
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> July 15	15th day after campaign treasurer appointment (officeholder only) Final report (Attach C/OH - FR)	
10 PERIOD COVERED	Month Day Year <b>7 / 1 / 2012</b>	<b>12 / 31 / 2012</b>	
11 ELECTION	ELECTION DATE Month Day Year <b>/ /</b>	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any) <b>Mayor</b>	13 OFFICE SOUGHT (if known)	

**GO TO PAGE 2**

2013

**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)  
00999999

2 Total pages filed:

4

3 CANDIDATE /  
OFFICEHOLDER  
NAME

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

LEE

LEFFINGWELL

4 CANDIDATE /  
OFFICEHOLDER  
MAILING  
ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

4516 Balcones Drive  
Austin, TX 78731

☐ change of address

5 CANDIDATE/  
OFFICEHOLDER  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(512) 422-6150

6 CAMPAIGN  
TREASURER  
NAME

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

Katheryn

Kitty Clark

7 CAMPAIGN  
TREASURER  
ADDRESS  
(residence or business)

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

4308 Avenue D  
Austin, TX 78751

8 CAMPAIGN  
TREASURER  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(512) 453-6246

9 REPORT TYPE

☒ January 15

☐ 30th day before election

☐ Runoff

☐ 15th day after campaign  
treasurer appointment  
(officeholder only)

☐ July 15

☐ 8th day before election

☐ Exceeded \$500  
limit

☐ Final report (Attach C/OH - FR)

10 PERIOD  
COVERED

Month

Day

Year

7 / 1 / 2012

THROUGH

Month

Day

Year

12 / 31 / 2012

11 ELECTION

ELECTION DATE

Month

Day

Year

/ /

ELECTION TYPE

☐ Primary

☐ Runoff

☐ General

☐ Special

12 OFFICE

OFFICE HELD (if any)

Mayor

13 OFFICE SOUGHT (if known)

GO TO PAGE 2



# **CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS**

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

14 C/OH NAME

LEE LEFFINGWELL

15 ACCOUNT # (Ethics Commission Filers)

00999999

16 NOTICE FROM  
POLITICAL  
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

COMMITTEE NAME

☐ GENERAL

COMMITTEE ADDRESS

☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages17 CONTRIBUTION  
TOTALS

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

\$ -0-

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

\$ -0-

EXPENDITURE  
TOTALS

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

\$ 20.00

4. TOTAL POLITICAL EXPENDITURES

\$ 378.35

CONTRIBUTION  
BALANCE

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

\$ 23367

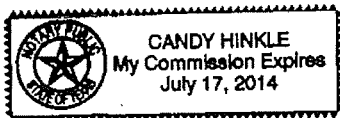
OUTSTANDING  
LOAN TOTALS

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

\$ 90,910.93

18 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.



*Lee Leffingwell*  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Lee Leffingwell, this the 15 day of January, 20 13, to certify which, witness my hand and seal of office.

*Candy Hinkle*  
Signature of officer administering oath

*Candy Hinkle*  
Printed name of officer administering oath

*Notary Public*  
Title of officer administering oath

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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 Total pages Schedule F: <b>1</b>	2 FILER NAME <b>LEE LEFFINGWELL</b>	3 ACCOUNT # (Ethics Commission Filers) <b>00999999</b>
---------------------------------------	--	---

4 Date <b>7/31/2012</b>	5 Payee name <b>Austin AFL-CIO Council</b>
----------------------------	---

6 Amount (\$) <b>\$145.00</b>	7 Payee address; City; State; Zip Code <b>1106 Lavaca Austin, TX 78701</b>
----------------------------------	---

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <b>Contribution/Donations made by Officeholder</b>	(b) Description (If travel outside of Texas, complete Schedule T) <b>Officeholder expense - donation Labor Day Event</b>
--------------------------	--	---

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
---	-------------------------------	---------------	-------------

Date <b>7/5/2012</b>	Payee name <b>First Bank Merchant Services</b>
-------------------------	---

Amount (\$) <b>\$118.35</b>	Payee address; City; State; Zip Code <b>5565 Glenridge Connector NE Atlanta, GA 30342</b>
--------------------------------	--

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Accounting/Banking</b>	Description (If travel outside of Texas, complete Schedule T) <b>Credit card processing fees</b>
------------------------	---	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
---	-------------------------------	---------------	-------------

Date <b>8/6/2012</b>	Payee name <b>NGPIVIAN Software</b>
-------------------------	--

Amount (\$) <b>\$95.00</b>	Payee address; City; State; Zip Code <b>1101 15th St. NW Washington, DC 20005</b>
-------------------------------	--

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Office Overhead/Rental Expense</b>	Description (If travel outside of Texas, complete Schedule T) <b>Database Software</b>
------------------------	---	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
---	-------------------------------	---------------	-------------

Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
-------------	--------------------------------------

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
---	-------------------------------	---------------	-------------

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

**INTEREST EARNED, OTHER CREDITS/GAINS/  
REFUNDS, AND PURCHASE OF INVESTMENTS****SCHEDULE K**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:

1

2 FILER NAME

LEE LEFFINGWELL

3 ACCOUNT # (Ethics Commission Filers)

00999999

4 Date

8/17/12

5 Name of person from whom amount is received

Austin Energy

8 Amount  
(\$)

\$ 210.50

6 Address of person from whom amount is received; City; State; Zip Code

Austin, Texas

7 Purpose for which amount is received

Refund of deposit

Date

7/9/12

Name of person from whom amount is received

Time Warner

Amount  
(\$)

\$ 71.40

Address of person from whom amount is received; City; State; Zip Code

12012 N. MoPac

Austin, TX 78759

Purpose for which amount is received

Refund

Date

Name of person from whom amount is received

Amount  
(\$)

Address of person from whom amount is received; City; State; Zip Code

Purpose for which amount is received

Date

Name of person from whom amount is received

Amount  
(\$)

Address of person from whom amount is received; City; State; Zip Code

Purpose for which amount is received

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

2013

# 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) 0000500	2 Total pages filed: 5
3 CANDIDATE / OFFICEHOLDER NAME	(MS) MRS / MR FIRST MI Ms. Kathrynne B NICKNAME LAST SUFFIX Kathie Tovo		<b>OFFICE USE ONLY</b> Date Received 2013 JAN 15 Austin City Clerk RECEIVED Date Hand-delivered or Postmarked Receipt # Amount Date Processed Date Imaged
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX APT / SUITE # CITY STATE ZIP CODE 809 West 32nd Street Austin Tx 78705		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 565-5361		
6 CAMPAIGN TREASURER NAME	MS / MRS (MR) FIRST MI Mr. Joseph NICKNAME LAST Pinnelli		
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE P.O. Box 50038		No record of filing 2-2-25 on 2-2-42 at any point
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (512) 478-5958		
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Extended limit		
10 PERIOD COVERED	Month Day Year 7 / 1 / 2012 THROUGH 12 / 31 / 12		
11 ELECTION	ELECTION DATE Month Day Year / / ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special		
12 OFFICE	OFFICE HELD (if any) City Council Place 3		13 OFFICE SOUGHT (if known) N/A

GO TO PAGE 2

2013

# 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)

0000500

2 Total pages filed:

5

## OFFICE USE ONLY

Date Received

2013 JAN 15 PM 2:53

AUSTIN CITY CLERK  
RECEIVED

Date Hand-delivered or Postmarked

Receipt #

Amount

Date Processed

Date Imaged

3 CANDIDATE /  
OFFICEHOLDER  
NAME

(MS) MRS / MR

FIRST

MI

Ms.  
NICKNAMEKathryne  
LASTB  
SUFFIX

Kathie Tovo

4 CANDIDATE /  
OFFICEHOLDER  
MAILING  
ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

809 West 32nd Street Austin Tx 78705

☐ change of address5 CANDIDATE/  
OFFICEHOLDER  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(512)

565-5361

6 CAMPAIGN  
TREASURER  
NAME

MS / MRS (MR)

FIRST

MI

Mr.  
NICKNAMEJoseph  
LASTPinnelli  
SUFFIX7 CAMPAIGN  
TREASURER  
ADDRESS  
(residence or business)

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

P.O. Box 50038

Austin Tx

78763

8 CAMPAIGN  
TREASURER  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(512)

478-5958

9 REPORT TYPE



January 15



30th day before election



Runoff

15th day after campaign  
treasurer appointment  
(officeholder only)

July 15



8th day before election

Exceeded \$500  
limit

Final report (Attach C/OH - FR)

10 PERIOD  
COVERED

Month

Day

Year

7 / 1 / 2012

THROUGH

Month

Day

Year

12 / 31 / 12

11 ELECTION

ELECTION DATE

Month

Day

Year

/ /

ELECTION TYPE



Primary



Runoff



General



Special

12 OFFICE

OFFICE HELD (if any)

City Council Place 3

13 OFFICE SOUGHT (if known)

N/A

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

14 C/OH NAME

15 ACCOUNT # (Ethics Commission Filers)

16 NOTICE FROM  
POLITICAL  
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE 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

☐ GENERAL☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages17 CONTRIBUTION  
TOTALS

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

\$ .00

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

\$ .00

EXPENDITURE  
TOTALS

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

\$ .00

4. TOTAL POLITICAL EXPENDITURES

\$ 2,528

CONTRIBUTION  
BALANCE

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

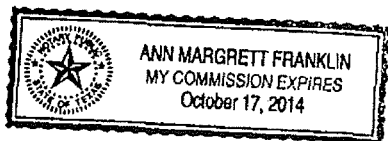
\$ .00

OUTSTANDING  
LOAN TOTALS

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

\$ 61,807.06

## 18 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 B. Toro  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Kathryne B. Toro, this the 15 day of January, 20 11, to certify which, witness my hand and seal of office.

Ann Margaret Franklin  
Signature of officer administering oath

Ann Margaret Franklin  
Printed name of officer administering oath

Notary  
Title of officer administering oath

# **POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS**

## **SCHEDULE G**

### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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 Total pages Schedule G: <b>2</b>		2 FILER NAME <b>Kathryne B Tovo</b>		3 ACCOUNT # (Ethics Commission Filers) <b>00005000</b>	
4 Date <b>10-8-12</b>		5 Payee name <b>South Austin Democrats</b>			
6 Amount (\$) <b>100</b>  <input type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code <b>P.O. Box 152592 Austin Tx 78715-2592</b>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <b>event expense</b>		(b) Description (If travel outside of Texas, complete Schedule T) <b>sponsorship</b>	
Date <b>10-16-12</b>		Payee name <b>Travis County Democratic Party</b>			
Amount (\$) <b>100</b>  <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code <b>P.O. Box 684263 Austin Tx 78768-4263</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>event expense</b>		Description (If travel outside of Texas, complete Schedule T) <b>sponsorship</b>	
Date <b>10-24-12</b>		Payee name <b>Housing Works Action PAC</b>			
Amount (\$) <b>150</b>  <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code <b>P.O. Box 302096 Austin Tx 78703</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>donation</b>		Description (If travel outside of Texas, complete Schedule T) <b>campaign for Proposition 15</b>	
Date <b>8-23-12</b>		Payee name <b>Thompson and Knight LLP</b>			
Amount (\$) <b>\$1,668</b>  <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code <b>98 San Jacinto Blvd. Suite 1900 Austin Tx 78701</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>legal expenses</b>		Description (If travel outside of Texas, complete Schedule T) <b>assistance with required financial forms</b>	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

# **POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS**

## **SCHEDULE G**

### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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 Total pages Schedule G: 2		2 FILER NAME Kathryne B Tovo		3 ACCOUNT # (Ethics Commission Filers) 00005000	
4 Date 12-3-12		5 Payee name Thompson and Knight LLP			
6 Amount (\$) \$510 <input type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code 98 San Jacinto Blvd Suite 1900 Austin Tx 78701			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) legal expenses		(b) Description (If travel outside of Texas, complete Schedule T) assistance with required financial forms	
Date		Payee name			
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T)	
Date		Payee name			
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T)	
Date		Payee name			
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T)	
Date		Payee name			
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED



**EXEMPTION STATEMENT**  
(To be used only when no electronic filing of a  
Campaign Finance Report (C&E) will be done)

**NAME OF CANDIDATE OR COMMITTEE:**

Tovo      Kathryne      Beth  
(Last)                      (First)                      (Middle)

**ADDRESS:** 809 West 32nd St. Austin Tx 78705

**DATE OF FILING:** 1-15-2013

**STATEMENT**

I/we, Kathryne B Tovo (Name of Candidate or Committee), have not raised and do not intend to raise more than \$30,000 in contributions for the campaign period of July 1, 20 12 through December 31, 20 12. Therefore, I/we will not be filing our election contribution and expenditure reports (C&E) electronically. If contributions raised exceed \$30,000, I/we will file subsequent Campaign Finance Reports (C&E) electronically.

Kathryne B Tovo  
Signed by Candidate or Campaign Committee

1/13/13  
Date

NOTE: The Code requires that if contributions exceed \$30,000, subsequent Campaign Finance Reports (C&E) must be filed electronically.



2012

# 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)  
00001564

2 PAGE #  
1 of ~~30~~ 31

3 CANDIDATE /  
OFFICEHOLDER  
NAME

MS / MRS / MR FIRST MI  
Mrs. Sheryl  
NICKNAME LAST SUFFIX  
Cole

## OFFICE USE ONLY

Date Received

2012 JAN 1

AUSTIN CITY CLERK  
RECEIVED

Date Hand-delivered or Date Postmarked

4 CANDIDATE /  
OFFICEHOLDER  
MAILING  
ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  
P. O. Box 1564  
Austin, TX 78767

☒ Change of Address

5 CAMPAIGN  
TREASURER  
NAME

MS / MRS / MR FIRST  
Mr. Joseph  
NICKNAME LAST  
Parker

6 CAMPAIGN  
TREASURER  
ADDRESS  
(Residence or business)

STREET ADDRESS (NO PO BOX PLEASE):  
5918 Lookout Mountain  
Austin, TX 78731

7 CAMPAIGN  
TREASURER  
PHONE

AREA CODE PHONE NUMBER  
(512) 323-6605

8 REPORT TYPE

☒ January 15 ☐ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (officeholder only)  
☐ July 15 ☐ 8th day before election ☐ Exceeded \$500 limit ☐ Final report (Attach C/OH - FR)

9 PERIOD  
COVERED

Month Day Year THROUGH Month Day Year  
11/30/2011 12/31/2011

10 ELECTION

ELECTION DATE ELECTION TYPE  
Month Day Year ☐ Primary ☐ Runoff ☒ General ☐ Special  
05/17/2012

11 OFFICE

OFFICE HELD (if any)  
Austin City Council District 6

12 OFFICE SOUGHT (If known)  
Austin City Council District 6

GO TO PAGE 2

FORM C/OH  
COVER SHEET PG 1

Electronic Filing Version 3.4.3

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

13 C/OH NAME Cole, Sheryl (Mrs.)

14 ACCOUNT # (Ethics Commission filers)  
0000156415 NOTICE  
FROM  
POLITICAL  
COMMITTEE(S)

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

COMMITTEE TYPE

COMMITTEE NAME

☐ GENERAL

COMMITTEE ADDRESS

☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

☐ additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

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

\$

875.00

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

\$

54,425.00

EXPENDITURE  
TOTALS

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

\$

0.00

4. TOTAL POLITICAL EXPENDITURES

\$

19,299.18

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

\$

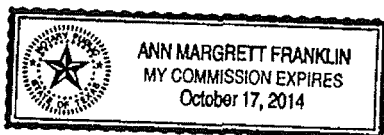
36,000.82

OUTSTANDING  
LOAN TOTALS6. 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.

*Sheryl N Cole*  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Sheryl Cole, this the 17 day  
of January, 2012, to certify which, witness my hand and seal of office.

*Ann Margaret Franklin*  
Signature of officer administering oath

Ann Margaret Franklin  
Print name of officer administering oath

Notary  
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: 1/24 Report: 3/30

2 FILER NAME Cole, Sheryl (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00001564

4 Date

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

Ausley, Tom

7 Amount of  
contribution (\$)

8 In-kind contribution  
description (if applicable)

12/11/2011

6 Contributor address; City; State; Zip Code

3737 Laurelledge  
Austin, TX 78731

\$200.00

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

9 Principal occupation / Job title (See Instructions)  
Attorney

10 Employer (See Instructions)

Ausley, Algert, Robertson & Flores, LLP

Date

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

Ausley, Tom & Robbie

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

12/15/2011

Contributor address; City; State; Zip Code

3707 Laurel Ledge Lane  
Austin, TX 78731

\$200.00

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

Principal occupation / Job title (See Instructions)  
Attorney/Community Volunteer

Employer (See Instructions)

Ausley, Algert, Robertson & Flores, L.L.P./None

Date

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

Auten, Roland Swenson and Roseana

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

12/14/2011

Contributor address; City; State; Zip Code

1507 Yaupon Valley Rd  
Westlake Hills, TX 78746

\$700.00

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

Principal occupation / Job title (See Instructions)  
CoFounder/Designer, Writer

Employer (See Instructions)

SXSW/Self

Date

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

Ball, Teena

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

12/29/2011

Contributor address; City; State; Zip Code

4011 Westlake Dr.  
Austin, TX 78746

\$350.00

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

Principal occupation / Job title (See Instructions)  
Owner

Employer (See Instructions)

Vogue Colleges

Date

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

Barchas, Janine

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

12/10/2011

Contributor address; City; State; Zip Code

902 Blanco St  
Austin, TX 78703

\$100.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #  
Schedule: 2/24 Report: 4/30

2 FILER NAME Cole, Sheryl (Mrs.)

3 ACCOUNT # (Ethics Commission filers)  
00001564

4 Date  
  
12/30/2011

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

6 Contributor address; City; State; Zip Code  
300 Bowie  
#4004  
Austin, TX 78703

7 Amount of  
contribution (\$)  
  
\$200.00

8 In-kind contribution  
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)  
VP of Grants and Community Affairs

10 Employer (See Instructions)  
St. David's

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bartam, John and Ashley

12/20/2011

Contributor address; City; State; Zip Code  
309 McConnell Dr.  
Austin, TX 78746

Amount of  
contribution (\$)  
  
\$700.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Attorney/Attorney

Employer (See Instructions)  
Armbrust & Brown, PLLC/AG's Officee

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bayes, Donald and Karen

12/08/2011

Contributor address; City; State; Zip Code  
3501 Arrowhead Cir.  
Round Rock, TX 78681

Amount of  
contribution (\$)  
  
\$700.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Director of Construction/Property Manager

Employer (See Instructions)  
Gray Associates/AMI Austin Lofts

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Beckham, Kimberly and Brian

12/15/2011

Contributor address; City; State; Zip Code  
11205 Limoncito Ct.  
Austin, TX 78750

Amount of  
contribution (\$)  
  
\$700.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Attorney/Homemaker

Employer (See Instructions)  
Armbrust & Brown, PLLC/None

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bell, Hubert

12/29/2011

Contributor address; City; State; Zip Code  
170 Beaver Rd.  
Elgin, TX 78621

Amount of  
contribution (\$)  
  
\$100.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #  
Schedule: 3/24 Report: 5/30

2 FILER NAME Cole, Sheryl (Mrs.)

3 ACCOUNT # (Ethics Commission filers)  
00001564

4 Date  
  
12/22/2011

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bernstein, Joshua and Erin

6 Contributor address; City; State; Zip Code  
801 W. 5th St. #908  
Austin, TX 78703

7 Amount of  
contribution (\$)  
  
\$700.00

8 In-kind contribution  
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)  
Attorney/Homemaker

10 Employer (See Instructions)  
Armbrust & Brown, PLLC/None

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Betts, Charles

12/09/2011

Contributor address; City; State; Zip Code  
14741 Arrowhead Dr  
Austin, TX 78641

Amount of  
contribution (\$)  
  
\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Executive Director

Employer (See Instructions)  
Downtown Austin Alliance

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Beuerlein, Steven

12/19/2011

Contributor address; City; State; Zip Code  
2605 Woodmont Ave  
Austin, TX 78703

Amount of  
contribution (\$)  
  
\$300.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Owner

Employer (See Instructions)  
Burlington Ventures, Inc.

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Blodgett, Terrell

12/30/2011

Contributor address; City; State; Zip Code  
4100 Jackson Ave.  
#250  
Austin, TX 78731

Amount of  
contribution (\$)  
  
\$200.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Professor

Employer (See Instructions)  
The LBJ School of Public Affairs

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Brewer, James and Mary

12/08/2011

Contributor address; City; State; Zip Code  
9504 Prescott Dr.  
Austin, TX 78749

Amount of  
contribution (\$)  
  
\$700.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Project Manager Civil Engineer/Teacher

Employer (See Instructions)  
Gray Associates/AISD



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 4/24 Report: 6/30

2 FILER NAME Cole, Sheryl (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00001564

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Brock, Brent Grulke and Kristin

7 Amount of  
contribution (\$)

8 In-kind contribution  
description (if applicable)

12/16/2011

6 Contributor address; City; State; Zip Code  
2711 Tether Trl  
Austin, TX 78704

\$700.00

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

9 Principal occupation / Job title (See Instructions)  
Creative Director/Homemaker

10 Employer (See Instructions)  
SXSW/None

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Brown, Frank and Janice

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

12/21/2011

Contributor address; City; State; Zip Code  
602 Coquina Lane  
Austin, TX 78746

\$700.00

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

Principal occupation / Job title (See Instructions)  
Attorney/None

Employer (See Instructions)  
Armbrust Brown/None

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Brown McCarroll PAC

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

12/05/2011

Contributor address; City; State; Zip Code  
111 Congress Ave.  
# 1400  
Austin, TX 78701

\$350.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Burnett, Michel and Claudia

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

12/26/2011

Contributor address; City; State; Zip Code  
1601 Forrest Trl.  
Austin, TX 78703

\$700.00

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

Principal occupation / Job title (See Instructions)  
Attorney/Employee

Employer (See Instructions)  
Armbrust & Brown, PLLC/Global Talk LLC

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Byars, Samuel and Anne

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

12/19/2011

Contributor address; City; State; Zip Code  
2103 Schulte Avenue  
Austin, TX 78703

\$700.00

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

Principal occupation / Job title (See Instructions)  
Attorney/Homemaker

Employer (See Instructions)  
Armbrust & Brown, PLLC/None

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 5/24 Report: 7/30

2 FILER NAME Cole, Sheryl (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00001564

4 Date

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

CDM PAC

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

12/13/2011

6 Contributor address; City; State; Zip Code

3050 Post Oak Blvd.  
Suite 300  
Houston, TX 77056

\$350.00

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

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

Clark, Antoinette

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

12/08/2011

Contributor address; City; State; Zip Code

2200 Far Gallant Dr  
Austin, TX 78746

\$350.00

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

Principal occupation / Job title (See Instructions)

Homemaker

Employer (See Instructions)

None

Date

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

Clark, Joan

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

12/07/2011

Contributor address; City; State; Zip Code

4210 River Garden Trail  
Austin, TX 78746

\$350.00

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

Principal occupation / Job title (See Instructions)

Homemaker

Employer (See Instructions)

None

Date

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

Clark, Stephen

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

12/07/2011

Contributor address; City; State; Zip Code

4210 River Garden Trail  
Austin, TX 78746

\$350.00

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

Principal occupation / Job title (See Instructions)

Chairman

Employer (See Instructions)

Cypress Real Estate Advisors

Date

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

Clark, Timothy

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

12/08/2011

Contributor address; City; State; Zip Code

2200 Far Gallant Dr  
Austin, TX 78746

\$350.00

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

Principal occupation / Job title (See Instructions)

President

Employer (See Instructions)

Cypress Real Estate Advisors

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #  
Schedule: 6/24 Report: 8/30

2 FILER NAME Cole, Sheryl (Mrs.)

3 ACCOUNT # (Ethics Commission filers)  
00001564

4 Date  
  
12/12/2011

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Collins, Sharlene and Patrick

6 Contributor address; City; State; Zip Code  
1400 Yaupon Valley Rd.  
Austin, TX 78746

7 Amount of  
contribution (\$)  
  
\$700.00

8 In-kind contribution  
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)  
Attorney/Retired

10 Employer (See Instructions)  
Armbrust & Brown, PLLC/None

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Cook, Michael

12/29/2011

Contributor address; City; State; Zip Code  
Suite 215  
Austin, TX

Amount of  
contribution (\$)  
  
\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Cook Brooks Johnson PLLC

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Coopwood, Thomas

12/28/2011

Contributor address; City; State; Zip Code  
6717 Valburn Dr  
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)  
Retired

Employer (See Instructions)  
None

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Cotton, Jim

12/09/2011

Contributor address; City; State; Zip Code  
11000 Spicewood Pkwy  
Austin, TX 78750

Amount of  
contribution (\$)  
  
\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
McAllister and Associates

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Covington, Bryce Miller and Kristian

12/15/2011

Contributor address; City; State; Zip Code  
8204 Navidad Dr.  
Austin, TX 78735

Amount of  
contribution (\$)  
  
\$700.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Managing Principle/None

Employer (See Instructions)  
Endeavor Real Estate Group/None

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 7/24 Report: 9/30

2 FILER NAME Cole, Sheryl (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00001564

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Covington, Sid7 Amount of  
contribution (\$)8 In-kind contribution  
description (if applicable)

12/28/2011

6 Contributor address; City; State; Zip Code  
707 Placid Place  
Austin, TX 78731

\$100.00

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Cumberbatch, JenniferAmount of  
contribution (\$)In-kind contribution  
description (if applicable)

11/30/2011

Contributor address; City; State; Zip Code  
3 Green Lanes  
Austin, TX 78703

\$100.00

(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
OwnerEmployer (See Instructions)  
JR Cumberbatch Productions

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Curtis, MattAmount of  
contribution (\$)In-kind contribution  
description (if applicable)

12/06/2011

Contributor address; City; State; Zip Code  
807 Blanco #305  
Austin, TX 78703

\$150.00

(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
Director of Community RelationsEmployer (See Instructions)  
Home Away

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Eckert, David Smith and KarenAmount of  
contribution (\$)In-kind contribution  
description (if applicable)

12/15/2011

Contributor address; City; State; Zip Code  
100 Congress Ave.  
#300  
Austin, TX 78701

\$700.00

(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
Attorney/University of TexasEmployer (See Instructions)  
Armbrust & Brown/Lab Technician

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Ellis, ChrisAmount of  
contribution (\$)In-kind contribution  
description (if applicable)

12/12/2011

Contributor address; City; State; Zip Code  
3006 Sparkling Brook Lane  
Austin, TX 78746

\$700.00

(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
Managing Principal/Team SupervisorEmployer (See Instructions)  
Endeavor Real Estate Group/ACS

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #

Schedule: 8/24 Report: 10/30

**2** FILER NAME Cole, Sheryl (Mrs.)**3** ACCOUNT # (Ethics Commission filers)

00001564

**4** Date**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)

Escutia, Charles and Christina

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

11/30/2011

**6** Contributor address; City; State; Zip Code7604 Fawn Hollow Cove  
Austin, TX 78750

\$700.00

(If travel outside of Texas, complete Schedule T) ☐**9** Principal occupation / Job title (See Instructions)  
Owner/Broker**10** Employer (See Instructions)  
Hindsite 20/20 Real Estate Investments

Date

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

Farmer, Gary and Susan

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

12/11/2011

Contributor address; City; State; Zip Code

309 Lake Cliff Trail  
Austin, TX 78746

\$700.00

(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
President/HomemakerEmployer (See Instructions)  
Heritage Title Company of Austin/None

Date

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

Forrest, Hugh and Vivian

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

12/13/2011

Contributor address; City; State; Zip Code

703 E. 50th St.  
#B  
Austin, TX 78751

\$700.00

(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
Event Director/HomemakerEmployer (See Instructions)  
SXSW/None

Date

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

George, James

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

12/15/2011

Contributor address; City; State; Zip Code

P.O. Box 685193  
Austin, TX 78768

\$300.00

(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
AttorneyEmployer (See Instructions)  
James W. George Attorney at Law

Date

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

Getter, Becky and Kerry

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

12/15/2011

Contributor address; City; State; Zip Code

1101 E 11th st  
Austin, TX 78702

\$700.00

(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
Homemaker/CEOEmployer (See Instructions)  
None/Balcones Resources

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 9/24 Report: 11/30

2 FILER NAME Cole, Sheryl (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00001564

4 Date

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

Gilliland, Douglas

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

12/28/2011

6 Contributor address; City; State; Zip Code

1805 Buckingham Ct.  
Keller, TX 76262

\$350.00

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

9 Principal occupation / Job title (See Instructions)  
Land Developer

10 Employer (See Instructions)  
Triwest Enterprises

Date

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

Goodman, Shane

Amount of contribution (\$)

In-kind contribution description (if applicable)

12/07/2011

Contributor address; City; State; Zip Code

9403 Longvale Dr.  
Austin, TX 78729

\$300.00

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

Principal occupation / Job title (See Instructions)  
Construction Manager

Employer (See Instructions)  
D. R. Horton

Date

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

Gray, David and Mary

Amount of contribution (\$)

In-kind contribution description (if applicable)

12/11/2011

Contributor address; City; State; Zip Code

4307 Dunning Ln.  
Austin, TX 78746

\$700.00

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

Principal occupation / Job title (See Instructions)  
President/Homemaker

Employer (See Instructions)  
Gray Associates/None

Date

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

Gullahorn, Jack and Patti

Amount of contribution (\$)

In-kind contribution description (if applicable)

12/28/2011

Contributor address; City; State; Zip Code

P.O. Box 140045  
Austin, TX 78714

\$700.00

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

Principal occupation / Job title (See Instructions)  
Lobbyist/Homemaker

Employer (See Instructions)  
Public Strategies Inc./None

Date

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

Hariston, Earl

Amount of contribution (\$)

In-kind contribution description (if applicable)

12/01/2011

Contributor address; City; State; Zip Code

1902 Chestnut Cr  
Round Rock, TX 78281

\$100.00

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

Principal occupation / Job title (See Instructions)  
Private Consultant

Employer (See Instructions)  
Self

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 10/24 Report: 12/30

2 FILER NAME Cole, Sheryl (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00001564

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Hawkins, Mark and Kelley

7 Amount of  
contribution (\$)

8 In-kind contribution  
description (if applicable)

12/21/2011

6 Contributor address; City; State; Zip Code  
5805 Carry Back Ln  
Austin, TX 78745

\$700.00

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

9 Principal occupation / Job title (See Instructions)  
Attorney/Homemaker

10 Employer (See Instructions)  
Armbrust & Brown, PLLC/None

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Herring, Stevyn and Katherine

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

12/05/2011

Contributor address; City; State; Zip Code  
2208 Real Catorce  
Austin, TX 78746

\$500.00

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

Principal occupation / Job title (See Instructions)  
Administrator

Employer (See Instructions)  
Fulbright & Jaworski LLP

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Heston, Rebecca and Felipe

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

12/15/2011

Contributor address; City; State; Zip Code  
2307 Fortune Dr.  
Austin, TX 78704

\$350.00

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

Principal occupation / Job title (See Instructions)  
Principal and Property Management/Employee

Employer (See Instructions)  
Endeavor Real Estate Group/Quick Draw Designs and  
Drafting

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Hobbs, Jeffrey and Lisa

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

12/21/2011

Contributor address; City; State; Zip Code  
3700 Hillbrook Dr.  
Austin, TX 78731

\$700.00

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

Principal occupation / Job title (See Instructions)  
Attorney/Attorney

Employer (See Instructions)  
Armbrust & Brown, PLLC/Vinson & Elkins LLP

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Hollingsworth, Wayne and D.P.

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

12/21/2011

Contributor address; City; State; Zip Code  
504 Furlong Dr.  
Austin, TX 78746

\$700.00

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

Principal occupation / Job title (See Instructions)  
Attorney/None

Employer (See Instructions)  
Armbrust Brown/None

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 11/24 Report: 13/30

2 FILER NAME Cole, Sheryl (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00001564

4 Date

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

Hutto, Denise

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

12/13/2011

6 Contributor address; City; State; Zip Code

1608 B Haskell  
Austin, TX 78702

\$350.00

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

9 Principal occupation / Job title (See Instructions)  
Accounting

10 Employer (See Instructions)  
SXSW

Date

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

Jackman, Merl

Amount of contribution (\$)

In-kind contribution description (if applicable)

12/28/2011

Contributor address; City; State; Zip Code

1000 W. 39th St  
Austin, TX 78756

\$350.00

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

Principal occupation / Job title (See Instructions)  
Optometrist

Employer (See Instructions)  
Texas State Optical

Date

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

Jefferson, Sedora

Amount of contribution (\$)

In-kind contribution description (if applicable)

12/11/2011

Contributor address; City; State; Zip Code

10740 Centennial Trail  
Austin, TX 78726

\$100.00

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

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
TASB

Date

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

Jones, Kenneth and Annette

Amount of contribution (\$)

In-kind contribution description (if applicable)

12/19/2011

Contributor address; City; State; Zip Code

305 Riley Rd.  
Austin, TX 78746

\$700.00

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

Principal occupation / Job title (See Instructions)  
Anesthesiologist/None

Employer (See Instructions)  
Capitol Anesthesiology Association/None

Date

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

Jones, Michael

Amount of contribution (\$)

In-kind contribution description (if applicable)

12/31/2011

Contributor address; City; State; Zip Code

2045 Zach Scott Street  
Austin, TX 78723

\$350.00

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

Principal occupation / Job title (See Instructions)  
Real Estate

Employer (See Instructions)  
Oak Hill Real Estate



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 12/24 Report: 14/30

2 FILER NAME Cole, Sheryl (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00001564

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
K2--PAC, David

7 Amount of  
contribution (\$)

8 In-kind contribution  
description (if applicable)

12/12/2011

6 Contributor address; City; State; Zip Code  
8127 Mesa Dr.  
#206  
Austin, TX 78759

\$500.00

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Koepke, Elizabeth

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

12/15/2011

Contributor address; City; State; Zip Code  
1306 Bentwood  
Austin, TX 78722

\$350.00

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

Principal occupation / Job title (See Instructions)  
Entertainer

Employer (See Instructions)  
Self

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Krause, Daniel

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

12/27/2011

Contributor address; City; State; Zip Code  
2420 Jarratt Ave.  
Austin, TX 78703

\$350.00

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

Principal occupation / Job title (See Instructions)  
CEO

Employer (See Instructions)  
Allied Consultants

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Krumme, Gregg and Robin

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

12/20/2011

Contributor address; City; State; Zip Code  
10702 Hastings Ln.  
Austin, TX 78750

\$700.00

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

Principal occupation / Job title (See Instructions)  
Attorney/Attorney

Employer (See Instructions)  
Armbrust & Brown

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
League, Tim

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

12/12/2011

Contributor address; City; State; Zip Code  
1717 W. Sixth Street  
Suite 351  
Austin, TX 78703

\$350.00

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

Principal occupation / Job title (See Instructions)  
Founder

Employer (See Instructions)  
Alamo Drafthouse

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 13/24 Report: 15/30

2 FILER NAME Cole, Sheryl (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00001564

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Link, Tom7 Amount of  
contribution (\$)8 In-kind contribution  
description (if applicable)

12/17/2011

6 Contributor address; City; State; Zip Code  
211 E. 7th St.  
Suite 510  
Austin, TX 78701

\$350.00

(If travel outside of Texas, complete Schedule T) ☐9 Principal occupation / Job title (See Instructions)  
Investor10 Employer (See Instructions)  
Self

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Littlefield, SueAmount of  
contribution (\$)In-kind contribution  
description (if applicable)

12/12/2011

Contributor address; City; State; Zip Code  
204 Westhaven Dr.  
Austin, TX 78746

\$350.00

(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
AttorneyEmployer (See Instructions)  
Armbrust & Brown, PLLC/None

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Llamas, JoeAmount of  
contribution (\$)In-kind contribution  
description (if applicable)

12/28/2011

Contributor address; City; State; Zip Code  
816 Suite 1640 Congress Ave  
Austin, TX 78701

\$100.00

(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
Senior DevelopmentEmployer (See Instructions)  
McShane Development Co

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Lorenz, Perry and SheridanAmount of  
contribution (\$)In-kind contribution  
description (if applicable)

12/29/2011

Contributor address; City; State; Zip Code  
1311 A, East 6th St.  
Austin, TX 78702

\$700.00

(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
Founder/HousewifeEmployer (See Instructions)  
Constuctive Ventures/Community Volunteer

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Lynk, StevenAmount of  
contribution (\$)In-kind contribution  
description (if applicable)

12/16/2011

Contributor address; City; State; Zip Code  
6004 Ronchamps Dr.  
Round Rock, TX 78681

\$250.00

(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
AssociateEmployer (See Instructions)  
CDM

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 14/24 Report: 16/30

2 FILER NAME Cole, Sheryl (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00001564

4 Date

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

Maier, Richard

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

12/01/2011

6 Contributor address; City; State; Zip Code

704 E. 45th 1/2 St.  
Austin, TX 78751

\$350.00

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

9 Principal occupation / Job title (See Instructions)  
Vice President and Land Manager

10 Employer (See Instructions)  
D.R. Horton

Date

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

Majewski, George and Carlyn

Amount of contribution (\$)

In-kind contribution description (if applicable)

12/15/2011

Contributor address; City; State; Zip Code

1800 Parkside Ln  
Austin, TX 78745

\$700.00

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

Principal occupation / Job title (See Instructions)  
Product Planner/None

Employer (See Instructions)  
Coinstar/None

Date

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

Mardegian, Scott Wilcox and Rachael

Amount of contribution (\$)

In-kind contribution description (if applicable)

12/14/2011

Contributor address; City; State; Zip Code

2507 Cascade Dr.  
Austin, TX 78757

\$700.00

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

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

Employer (See Instructions)  
SXSX

Date

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

Marsh, Charles

Amount of contribution (\$)

In-kind contribution description (if applicable)

12/12/2011

Contributor address; City; State; Zip Code

2212 East Windsor Rd.  
Austin, TX 78703

\$350.00

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

Principal occupation / Job title (See Instructions)  
Principal

Employer (See Instructions)  
Endeavor Real Estate Group

Date

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

Martin, Kenneth

Amount of contribution (\$)

In-kind contribution description (if applicable)

11/30/2011

Contributor address; City; State; Zip Code

1100 Lexington Cr  
DeSoto, TX 75115

\$350.00

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

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Kenneth D Martin & Associates

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 15/24 Report: 17/30

2 FILER NAME Cole, Sheryl (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00001564

4 Date

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

Mathias, Matt

7 Amount of  
contribution (\$)

8 In-kind contribution  
description (if applicable)

12/16/2011

6 Contributor address; City; State; Zip Code

2915 Regents Park  
Austin, TX 78746

\$250.00

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

9 Principal occupation / Job title (See Instructions)  
Founder

10 Employer (See Instructions)  
Matt Mathias & Company

Date

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

McClendon, Burwell and Terri

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

12/01/2011

Contributor address; City; State; Zip Code

1905 Canonera  
Austin, TX 78746

\$700.00

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

Principal occupation / Job title (See Instructions)  
Comptroller/Homemaker

Employer (See Instructions)  
DR Horton/None

Date

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

McDaniels, Demetrius

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

11/30/2011

Contributor address; City; State; Zip Code

7601 Sandia Loop  
Austin, TX 78735

\$350.00

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

Principal occupation / Job title (See Instructions)  
Lobbyist

Employer (See Instructions)  
Greenberg Traurig LLP

Date

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

McDonald, Katrina

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

12/14/2011

Contributor address; City; State; Zip Code

11802 Nene Dr.  
Austin, TX 78750

\$100.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

McGlaufflin, Duane I and Cynthia

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

12/12/2011

Contributor address; City; State; Zip Code

2300 Picadilly Dr.  
Round Rock, TX 78664

\$700.00

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

Principal occupation / Job title (See Instructions)  
President/Homemaker

Employer (See Instructions)  
DNT Construction/None

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 16/24 Report: 18/30

2 FILER NAME Cole, Sheryl (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00001564

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Means, Bertha7 Amount of  
contribution (\$)8 In-kind contribution  
description (if applicable)

12/30/2011

6 Contributor address; City; State; Zip Code  
7400 Valburn Dr  
Austin, TX 78731

\$100.00

(If travel outside of Texas, complete Schedule T) ☐9 Principal occupation / Job title (See Instructions)  
Owner10 Employer (See Instructions)  
Austin Cab

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Mendiola, Darin Klein and NatalieAmount of  
contribution (\$)In-kind contribution  
description (if applicable)

12/20/2011

Contributor address; City; State; Zip Code  
4419 Barrow  
Austin, TX 78751

\$700.00

(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
Producer/Best EffortsEmployer (See Instructions)  
SXSXW/Best Efforts

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Momim, NaseemAmount of  
contribution (\$)In-kind contribution  
description (if applicable)

12/12/2011

Contributor address; City; State; Zip Code  
1532 Visalia Ln.  
Austin, TX 78727

\$350.00

(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
Business OwnerEmployer (See Instructions)  
Self

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Momin, AminAmount of  
contribution (\$)In-kind contribution  
description (if applicable)

12/15/2011

Contributor address; City; State; Zip Code  
11800 Metric Blvd.  
Austin, TX 78758

\$350.00

(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
OwnerEmployer (See Instructions)  
Convenient Store Travel Mart

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Moore, Alan and MarthaAmount of  
contribution (\$)In-kind contribution  
description (if applicable)

12/20/2011

Contributor address; City; State; Zip Code  
2420 Harris Boulevard  
Austin, TX 78703

\$700.00

(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
Principal/Best EffortsEmployer (See Instructions)  
MHMATM LLC/Best Efforts

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 17/24 Report: 19/30

2 FILER NAME Cole, Sheryl (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00001564

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Morrison, Gregory

7 Amount of  
contribution (\$)

8 In-kind contribution  
description (if applicable)

12/30/2011

6 Contributor address; City; State; Zip Code  
9310 Le Conte Cove  
Austin, TX 78749

\$100.00

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

9 Principal occupation / Job title (See Instructions)  
Attorney

10 Employer (See Instructions)  
Morrison Law Firm

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Nassour, Jimmy

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

12/12/2011

Contributor address; City; State; Zip Code  
3839 Bee Cave Road  
Suite 200  
Westlake Hills, TX 78746

\$350.00

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

Principal occupation / Job title (See Instructions)  
Lawyer

Employer (See Instructions)  
Jimmy Nassour Law Office

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Needham, John

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

12/23/2011

Contributor address; City; State; Zip Code  
100 Congress Ave.  
#780  
Austin, TX 78701

\$700.00

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

Principal occupation / Job title (See Instructions)  
Owner/Best Efforts

Employer (See Instructions)  
Riverside Resources/Best Efforts

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Newberg, Jeffrey and Valerie

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

12/14/2011

Contributor address; City; State; Zip Code  
3830 Hunterwood Point  
Austin, TX 78746

\$700.00

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

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

Employer (See Instructions)  
Endeavor Real Estate/Center for Convenatal Judaism

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Nikkels, Jason and Audrey

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

12/12/2011

Contributor address; City; State; Zip Code  
1762 Lookout Forest  
San Antonio, TX 78260

\$700.00

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

Principal occupation / Job title (See Instructions)  
Branch Manager/Homemaker

Employer (See Instructions)  
DNT Construction/None

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 18/24 Report: 20/30

2 FILER NAME Cole, Sheryl (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00001564

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Nortey, James

7 Amount of  
contribution (\$)

8 In-kind contribution  
description (if applicable)

12/01/2011

6 Contributor address; City; State; Zip Code  
111 Congress Avenue  
#1700  
Austin, TX 78701

\$350.00

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

9 Principal occupation / Job title (See Instructions)  
Associate

10 Employer (See Instructions)  
Andrews Kurth LLP

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Oppenheimer, Richard

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

12/10/2011

Contributor address; City; State; Zip Code  
6102 Mt. Villa Cove  
Austin, TX 78731

\$100.00

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

Principal occupation / Job title (See Instructions)  
Principal

Employer (See Instructions)  
Reo Radio Group

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Ott, David

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

12/20/2011

Contributor address; City; State; Zip Code  
3731 University Blvd.  
Austin, TX 77005

\$250.00

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

Principal occupation / Job title (See Instructions)  
Architect

Employer (See Instructions)  
The Hanover Company

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Pastor, Andrew and Laura

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

12/14/2011

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

\$700.00

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

Principal occupation / Job title (See Instructions)  
Managing Director and Principle/None

Employer (See Instructions)  
Endeavor Real Estate Group/None

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Patel, Abdul

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

12/12/2011

Contributor address; City; State; Zip Code  
1805 Far Gallant Dr.  
Austin, TX 78746

\$350.00

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

Principal occupation / Job title (See Instructions)  
Business Owner

Employer (See Instructions)  
Sunruse Mini Mart

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 19/24 Report: 21/30	
2 FILER NAME Cole, Sheryl (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00001564	
4 Date  12/17/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pollan, Thomas  6 Contributor address; City; State; Zip Code 4017 Walnut Clay Drive Austin, TX 78731	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Attorney		10 Employer (See Instructions) Bickerstaff	
Date  12/15/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Purcell, Fred  Contributor address; City; State; Zip Code 12912 Park Drive Austin, TX 78732	Amount of contribution (\$)  \$300.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Lane Humboldt Construction	
Date  12/25/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reagan, Daniel and Kari Jo  Contributor address; City; State; Zip Code 2022 Laird Dr. Salt Lake City, UT 84108	Amount of contribution (\$)  \$700.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Management/Homemaker		Employer (See Instructions) Reagan National Avertising/None	
Date  12/14/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reagan, Frances and Jake Topping  Contributor address; City; State; Zip Code 1475 Federal Heights Dr. Salt Lake City, UT 84103-4443	Amount of contribution (\$)  \$700.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Advertising/Real Estate		Employer (See Instructions) Self/Self	
Date  12/30/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reagan, William and Julia  Contributor address; City; State; Zip Code 4100 McBrine Pl Austin, TX 78746	Amount of contribution (\$)  \$700.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) President/Consultant		Employer (See Instructions) Reagan National Avertising/Reagan National Advertising	



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 20/24 Report: 22/30

2 FILER NAME Cole, Sheryl (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00001564

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Reese, Andrew

7 Amount of  
contribution (\$)

8 In-kind contribution  
description (if applicable)

12/30/2011

6 Contributor address; City; State; Zip Code  
2914 Regents Park  
Austin, TX 78746

\$150.00

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Reese, Donald and Gina

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

12/27/2011

Contributor address; City; State; Zip Code  
100 Congress Ave.  
#780  
Austin, TX 78701

\$700.00

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

Principal occupation / Job title (See Instructions)  
Investor/None

Employer (See Instructions)  
Self/None

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Renbarger, Grace

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

12/28/2011

Contributor address; City; State; Zip Code  
4605 Charles Avenue  
Austin, TX 78746

\$100.00

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

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Self

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Schweitzer, John

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

12/21/2011

Contributor address; City; State; Zip Code  
3105 Above Stratford Pl  
Austin, TX 78746

\$350.00

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

Principal occupation / Job title (See Instructions)  
Principal

Employer (See Instructions)  
Campbell Capital LTD

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Scafford, Bruce and Nora

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

12/21/2011

Contributor address; City; State; Zip Code  
105 Brooks Hollow  
Lakeway, TX 78734

\$700.00

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

Principal occupation / Job title (See Instructions)  
Attorney/Homemaker

Employer (See Instructions)  
Armbrust & Brown, PLLC/None

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 21/24 Report: 23/30

2 FILER NAME Cole, Sheryl (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00001564

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Siff, Ted

7 Amount of  
contribution (\$)

8 In-kind contribution  
description (if applicable)

12/29/2011

6 Contributor address; City; State; Zip Code  
604 West 11th  
Austin, TX 78701

\$100.00

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

9 Principal occupation / Job title (See Instructions)  
CEO

10 Employer (See Instructions)  
Park Place Publications

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Smaha, Steve

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

12/09/2011

Contributor address; City; State; Zip Code  
5003 Lucas Lane  
Austin, TX 78731

\$350.00

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

Principal occupation / Job title (See Instructions)  
Consultant

Employer (See Instructions)  
Self-employed

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Smitheal, Jeremy and Ellen

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

12/23/2011

Contributor address; City; State; Zip Code  
100 Congress Ave.  
#780  
Austin, TX 78701

\$700.00

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

Principal occupation / Job title (See Instructions)  
Manager/Employee

Employer (See Instructions)  
Riverside Resources/Whitzman Management Corp

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Speck, Lawrence

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

12/18/2011

Contributor address; City; State; Zip Code  
800 West 5th St.  
#1102  
Austin, TX 78703

\$350.00

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

Principal occupation / Job title (See Instructions)  
Professor

Employer (See Instructions)  
The University of Texas at Austin School of Architecture

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Spies, Brad

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

12/19/2011

Contributor address; City; State; Zip Code  
1212 Guadalupe St.  
#802  
Austin, TX 78701

\$350.00

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

Principal occupation / Job title (See Instructions)  
Marketing

Employer (See Instructions)  
SXSX

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 22/24 Report: 24/30

2 FILER NAME Cole, Sheryl (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00001564

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Stacy, Tom and Melinda7 Amount of  
contribution (\$)8 In-kind contribution  
description (if applicable)

12/21/2011

6 Contributor address; City; State; Zip Code  
823 Congress Ave Suite 1111  
Austin, TX 78701

\$700.00

(If travel outside of Texas, complete Schedule T) ☐9 Principal occupation / Job title (See Instructions)  
Owner/Office Manager10 Employer (See Instructions)  
T. Stacy and Associates/T. Stacy and Associates

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Stuart, DonaldAmount of  
contribution (\$)In-kind contribution  
description (if applicable)

12/30/2011

Contributor address; City; State; Zip Code  
4105 Long Champ Dr.  
Austin, TX 78746

\$250.00

(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
AttorneyEmployer (See Instructions)  
Metcalf, Wolff, Stuart and Williams

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Suman, RonAmount of  
contribution (\$)In-kind contribution  
description (if applicable)

12/15/2011

Contributor address; City; State; Zip Code  
P.O. Box 4181  
Austin, TX 78765

\$350.00

(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
Sales ManagerEmployer (See Instructions)  
SXSX

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Taylor, Scott and KimAmount of  
contribution (\$)In-kind contribution  
description (if applicable)

12/20/2011

Contributor address; City; State; Zip Code  
10919 Enchanted Rock Cove  
Austin, TX 78726

\$700.00

(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
Attorney/HomemakerEmployer (See Instructions)  
Armbrust & Brown, PLLC/None

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Tomme, Dean and MarciAmount of  
contribution (\$)In-kind contribution  
description (if applicable)

12/15/2011

Contributor address; City; State; Zip Code  
P.O. Box 467  
Lampasas, TX 76550

\$700.00

(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
VP/TeacherEmployer (See Instructions)  
DNT Construction/Lampasas ISD

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 23/24 Report: 25/30	
2 FILER NAME Cole, Sheryl (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00001564	
4 Date  12/09/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Troilo, Arthur  6 Contributor address; City; State; Zip Code 700 E. 11th Street #300 Austin, TX 78701	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Attorney		10 Employer (See Instructions) Troilo Law Firm	
Date  12/10/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wainwright, Jon  Contributor address; City; State; Zip Code 4109 Ave F Austin, TX 78751	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Economist		Employer (See Instructions) MMC	
Date  12/28/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wheeler, Richard  Contributor address; City; State; Zip Code 1903 A, Crested Butte Dr. Austin, TX 78746	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Lakeway/Lohmans Investments, Inc.	
Date  12/14/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) White, Neel and Pam  Contributor address; City; State; Zip Code 4220 River Garden Trail Austin, TX 78746	Amount of contribution (\$)  \$700.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) President & CEO/None		Employer (See Instructions) White Construction/None	
Date  12/16/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wiginton, Don Kent and Jeannie  Contributor address; City; State; Zip Code 908 E. Live Oak St. Austin, TX 78704	Amount of contribution (\$)  \$700.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) None/Client Service Manager		Employer (See Instructions) None/CDM Smith	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 24/24 Report: 26/30

2 FILER NAME Cole, Sheryl (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00001564

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Wilcox, Mike Shea and Toni

7 Amount of  
contribution (\$)

8 In-kind contribution  
description (if applicable)

12/11/2011

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

\$700.00

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

9 Principal occupation / Job title (See Instructions)  
Executive Director/Homemaker

10 Employer (See Instructions)  
SXSW/None

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Williams, Talley

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

12/29/2011

Contributor address; City; State; Zip Code  
8209 Dark Ridge Cove  
Austin, TX 78737

\$200.00

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

Principal occupation / Job title (See Instructions)  
Partner

Employer (See Instructions)  
Metcalf, Wolff, Stuart and Williams

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Woelke, Allen and Nancy

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

12/15/2011

Contributor address; City; State; Zip Code  
4101 Galacia Dr.  
Austin, TX 78759

\$700.00

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

Principal occupation / Job title (See Instructions)  
VP/None

Employer (See Instructions)  
Camp Dresser & Mc Kee Inc/None

Date

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

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

12/30/2011

Contributor address; City; State; Zip Code  
1206 W. 8th St.  
Austin, TX 78701

\$350.00

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

Principal occupation / Job title (See Instructions)  
Partner

Employer (See Instructions)  
Golden Stuart & Wolff LLP

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Zarbock, Kent

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

12/01/2011

Contributor address; City; State; Zip Code  
705 W. Rim Dr.  
Austin, TX 78731

\$200.00

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

Principal occupation / Job title (See Instructions)  
Manager of Sales

Employer (See Instructions)  
D. R. Horton

**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.

<b>1 PAGE #</b> Schedule: 1/4 Report: 27/30		<b>2 FILER NAME</b> Cole, Sheryl (Mrs.)		<b>3 ACCOUNT # (TEC filers)</b> 00001564	
<b>4 Date</b> 11/30/2011	<b>5 Payee name</b> Adisa Communications				
<b>6 Amount (\$)</b> \$2,800.00	<b>7 Payee address</b> City; State; Zip Code 13492 Research Blvd. #120-631 Austin, TX 78750				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Consulting Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Announcement Media		
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 12/20/2011	<b>Payee name</b> Adisa Communications				
<b>Amount (\$)</b> \$558.00	<b>Payee address</b> City; State; Zip Code 13492 Research Blvd. #120-631 Austin, TX 78750				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Reimbursement for Campaign Expenses		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 12/30/2011	<b>Payee name</b> Adisa Communications				
<b>Amount (\$)</b> \$6,000.00	<b>Payee address</b> City; State; Zip Code 13492 Research Blvd. #120-631 Austin, TX 78750				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Social Media/Website		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 12/17/2011	<b>Payee name</b> Central Market				
<b>Amount (\$)</b> \$127.00	<b>Payee address</b> City; State; Zip Code 4001 N. Lamar Austin, TX 78756				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Staff lunch		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	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.

<b>1 PAGE #</b> Schedule: 2/4 Report: 28/30		<b>2 FILER NAME</b> Cole, Sheryl (Mrs.)		<b>3 ACCOUNT # (TEC filers)</b> 00001564
<b>4 Date</b> 12/30/2011	<b>5 Payee name</b> Jitahidi, Joia			
<b>6 Amount (\$)</b> \$1,500.00	<b>7 Payee address</b> City; State; Zip Code 5114 Balcones Woods Dr. Austin, TX 78759			
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Consulting Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Media/Communications	
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:
<b>Date</b> 12/30/2011	<b>Payee name</b> Lankes, Matt			
<b>Amount (\$)</b> \$250.00	<b>Payee address</b> City; State; Zip Code P. O. Box 300045 Austin, TX 78703			
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Event Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Announcement event photography	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:
<b>Date</b> 12/05/2011	<b>Payee name</b> League of Women Voters			
<b>Amount (\$)</b> \$60.00	<b>Payee address</b> City; State; Zip Code 1011 W 31st St # 510 Austin, TX 78705			
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) OTHER - Membership fee		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Membership fee	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:
<b>Date</b> 12/30/2011	<b>Payee name</b> Love, Claire			
<b>Amount (\$)</b> \$750.00	<b>Payee address</b> City; State; Zip Code 2006 Sandberg Dr. Austin, TX 78752			
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Administrative Assistant	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	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: 3/4 Report: 29/30

**2 FILER NAME**  
Cole, Sheryl (Mrs.)

**3 ACCOUNT # (TEC filers)**  
00001564

**4 Date**  
12/30/2011

**5 Payee name**  
Message, Audience and Presentation

**6 Amount (\$)**  
\$2,500.00

**7 Payee address** City; State; Zip Code  
2400 S. 4th St.  
Austin, TX 78704

**8 PURPOSE OF EXPENDITURE**

(a) Category (See Categories listed at the top of this schedule)  
Consulting Expense

(b) Description (If travel outside of Texas, complete Schedule T) ☐  
Political strategy

**9 Complete ONLY if direct expenditure to benefit C/OH**

Candidate / Officeholder name

Office sought:

Office held:

**Date**  
12/30/2011

**Payee name**  
Pay Pal

**Amount (\$)**  
\$3.05

**Payee address** City; State; Zip Code  
2211 North 1st St.  
San Jose, CA 95131

**PURPOSE OF EXPENDITURE**

Category (See Categories listed at the top of this schedule)  
Fees

Description (If travel outside of Texas, complete Schedule T) ☐  
Fees for online contributions

**Complete ONLY if direct expenditure to benefit C/OH**

Candidate / Officeholder name

Office sought:

Office held:

**Date**  
11/30/2011

**Payee name**  
PayPal

**Amount (\$)**  
\$1.13

**Payee address** City; State; Zip Code  
2211 N. 1st St.  
San Jose, CA 95131

**PURPOSE OF EXPENDITURE**

Category (See Categories listed at the top of this schedule)  
Fees

Description (If travel outside of Texas, complete Schedule T) ☐  
Fees for online contributions

**Complete ONLY if direct expenditure to benefit C/OH**

Candidate / Officeholder name

Office sought:

Office held:

**Date**  
12/30/2011

**Payee name**  
Rylo Consulting

**Amount (\$)**  
\$4,000.00

**Payee address** City; State; Zip Code  
908 E. 5th St.  
Suite 210  
Austin, TX 78702

**PURPOSE OF EXPENDITURE**

Category (See Categories listed at the top of this schedule)  
Accounting/Banking

Description (If travel outside of Texas, complete Schedule T) ☐  
Retainer for fundraising activities

**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.

<b>1 PAGE #</b> Schedule: 4/4 Report: 30/30		<b>2 FILER NAME</b> Cole, Sheryl (Mrs.)		<b>3 ACCOUNT # (TEC filers)</b> 00001564
<b>4 Date</b> 11/30/2011	<b>5 Payee name</b> South Austin Democrats			
<b>6 Amount (\$)</b> \$250.00	<b>7 Payee address</b> City; State; Zip Code PO Box 152592 Austin, TX 78715			
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political contributions	
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:
<b>Date</b> 11/30/2011	<b>Payee name</b> Word of Mouth Catering			
<b>Amount (\$)</b> \$500.00	<b>Payee address</b> City; State; Zip Code 919 West 12th Austin, TX 78701			
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Food/Beverage Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Announcement event catering	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:

**SCHEDULE V - attach to form C/OH**  
**PERSONS SOLICITING CONTRIBUTIONS ON YOUR BEHALF**  
**Reference 2-2-14, Austin City Code**

Enter the name and address of any person who has solicited and obtained contributions on your behalf, during the reporting period, of \$200 per person from five or more individuals. (You need not include individuals who raise funds totaling \$5,000 or less through a fundraising event in that individual's residence.)

**Name of person soliciting**

**Contributions:** Alice Glasco

**Address:** 5117 Valburn Ct., Austin, TX, 78731

**Name of person soliciting**

**Contributions:** Andrew Pastor

**Address:** 2908 Sparkling Brook Lane., Austin, TX, 78746

**Name of person soliciting**

**Contributions:** Jeannie Wiginton

**Address:** 908 E. Live Oak St., Austin, TX, 78704

**Name of person soliciting**

**Contributions:** David Armbrust

**Address:** 2807 Regents Park Austin, TX, 78746

**Name of person soliciting**

**Contributions:** Donald Reese

**Address:** 100 Congress Ave., #780., Austin, TX, 78701

**Name of person soliciting**

**Contributions:** Richard Maier

**Address:** 704 E. 45<sup>th</sup> St., Austin, TX, 78751

**Name of person soliciting**

**Contributions:** Michael Whelan

**Address:** 4800 Laurel Canyon Dr., Austin, TX, 78731



FORM COR-C/OH

# **CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER**

1 ACCOUNT # 100001564		2 Total pages filed:		OFFICE USE ONLY	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST Sheryl MI	Date Received		<div style="writing-mode: vertical-rl; transform: rotate(180deg);"> RECEIVED FEB 15 AM 9:37 AUSTIN CITY CLERK </div>	
	NICKNAME LAST Cole SUFFIX	Date Hand-delivered or Postmarked			
4 ORIGINAL REPORT TYPE	<input checked="" type="checkbox"/> January 15	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other (specify)		
	<input type="checkbox"/> July 15	<input type="checkbox"/> Exceeded \$500 limit			
	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> 15th day after treasurer appointment (officeholder only)			
	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Final report			
5 ORIGINAL PERIOD COVERED	Month Day Year	Month Day Year	Date Processed		
	11 / 30 / 2011 THROUGH 12 / 31 / 2011		Date Imaged		

## 6 EXPLANATION OF CORRECTION

The original report had an incorrect beginning date for "period covered" due to a misinterpretation of filing requirements. The corrected date of July 1, 2011 required the addition of six expenditures previously not reported. The "amount maintained" is also amended to reflect the balance of funds existing in the campaign bank account and officeholder account on the final day of the reporting period rather than the difference between campaign expenditures and contributions.

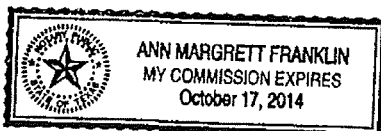
## 7 AFFIDAVIT

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

Check ONLY if applicable:

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

☐ **Other reports** (excluding semiannual reports due on or after September 1, 2011): I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.



*Sheryl Cole*  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Sheryl Cole, this the 15<sup>th</sup> day of February.

2012, to certify which, witness my hand and seal of office.

*Ann Margaret Franklin* Ann Margaret Franklin Notary  
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

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

## CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

**All Reports:** A filer who files a corrected report must submit a correction affidavit. The affidavit must identify the information that has changed.

**Reports filed with Texas Ethics Commission:** A corrected report (other than a report due 8 days before an election or a special report near election) filed with the Ethics Commission after its due date is not considered late for purposes of late-filing penalties if: (1) any error or omission in the report as originally filed was made in good faith, and (2) the person filing the report files a corrected report and a good-faith affidavit not later than the 14th business day after the date the person learns that the report as originally filed is inaccurate or incomplete.

**Semiannual Reports:** Effective September 1, 2011, a semiannual report (due January 15 or July 15) that is amended/corrected before the eighth day after the original report was filed is considered to have been filed on the date the original report was filed. A semiannual report that is amended/corrected on or after the eighth day after the original report was filed is considered to have been filed on the date the original report was filed if: (1) the amendment/correction is made before any complaint is filed with regard to the subject of the amendment/correction; and (2) the original report was made in good faith and without intent to mislead or misrepresent the information contained in the report.

Attach additional pages as necessary.

### INSTRUCTIONS FOR COMPLETING THIS FORM

*The following numbers correspond to the numbered boxes on the other side.*

**1. Account #.** If you file with the Ethics Commission, you should have received a letter acknowledging receipt of your campaign treasurer appointment and assigning you an account number. Put that number in this box. If you do not file with the Ethics Commission, skip this box.

**2. Total Pages Filed.** After completing this form and any attachments, count the number of pages. Enter that number in this box. Each side of a two-sided form counts as a page. In other words, this form is two pages.

**3. Candidate/Officeholder Name.** Put your full name here. Enter your name in the same way as on the report you are correcting.

**4. Original Report Type.** Mark the type of report you are correcting.

**5. Original Period Covered.** Enter the period covered by the report you are correcting. The year is important because filers sometimes correct reports years after filing the original.

**6. Explanation of Correction.** Attach any part of the campaign finance report form needed to report and explain corrections. Explain why there was an error on the original report. Also explain what information is being corrected and how the new information is different from the information on the original report. (Use additional pages if you need more space.) You may also use this area to request a waiver or reduction of a late-filing penalty and state the basis of your request.

**7. Affidavit.** Read the affidavit before signing. You must sign the affidavit in the presence of an individual authorized to take oaths. If signed before a notary public, the affidavit must include the notary's signature and seal.

# 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) 00001564	2 PAGE # 1 of 33
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Mrs. Sheryl		OFFICE USE ONLY Date Received Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged
	NICKNAME LAST SUFFIX Cole		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 1564 Austin, TX 78767		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Joseph		
	NICKNAME LAST SUFFIX Parker		
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 5918 Lookout Mountain Austin, TX 78731		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 323-6605		
8 REPORT TYPE	<input checked="" 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 type="checkbox"/> Final report (Attach C/OH - FR)		
9 PERIOD COVERED	Month Day Year    Month Day Year 07/01/2011    THROUGH    12/31/2011		
10 ELECTION	ELECTION DATE    ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special 05/17/2012 5/12/2012		
11 OFFICE	OFFICE HELD (if any) Austin City Council District 6		12 OFFICE SOUGHT (if known) Austin City Council District 6
GO TO PAGE 2			

**CANDIDATE / OFFICEHOLDER REPORT:  
SUPPORT & TOTALS****FORM C/OH  
COVER SHEET PG 2****13 C/OH NAME** Cole, Sheryl (Mrs.)**14 ACCOUNT #** (Ethics Commission filers)  
00001564**15 NOTICE  
FROM  
POLITICAL  
COMMITTEE(S)**

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

**COMMITTEE TYPE****COMMITTEE NAME**☐ **GENERAL****COMMITTEE ADDRESS**☐ **SPECIFIC****COMMITTEE CAMPAIGN TREASURER NAME**☐ additional pages**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

\$ 875.00

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

\$ 54,425.00

**EXPENDITURE  
TOTALS**

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

\$ 0.00

4. TOTAL POLITICAL EXPENDITURES

\$ 21,524.05

**CONTRIBUTION  
BALANCE**5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE  
LAST DAY OF THE REPORTING PERIOD

\$ 38,879.00

**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.\_\_\_\_\_  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day  
of \_\_\_\_\_, 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

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

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

**1** PAGE #

Schedule: 1/25 Report: 3/33

**2** FILER NAME Cole, Sheryl (Mrs.)

**3** ACCOUNT # (Ethics Commission filers)

00001564

**4** Date

12/11/2011

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Ausley, Tom

**6** Contributor address; City; State; Zip Code  
3737 Laureledge  
Austin, TX 78731

**7** Amount of  
contribution (\$)

\$200.00

**8** In-kind contribution  
description (if applicable)

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

**9** Principal occupation / Job title (See Instructions)  
Attorney

**10** Employer (See Instructions)

Ausley, Algert, Robertson & Flores, LLP

Date

12/15/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Ausley, Tom & Robbie

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

Amount of  
contribution (\$)

\$200.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)

Ausley, Algert, Robertson & Flores, L.L.P.

Date

12/14/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Auten, Roland Swenson and Roseana (\*3)

Contributor address; City; State; Zip Code  
1507 Yaupon Valley Rd  
Westlake Hills, TX 78746

Amount of  
contribution (\$)

\$700.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
CoFounder/Designer, Writer

Employer (See Instructions)

SXSW/Self

Date

12/29/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bali, Teena

Contributor address; City; State; Zip Code  
4011 Westlake Dr.  
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)  
Owner

Employer (See Instructions)

Vogue Colleges

Date

12/10/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Barchas, Janine

Contributor address; City; State; Zip Code

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)



# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #

Schedule: 2/25 Report: 4/33

**2** FILER NAME Cole, Sheryl (Mrs.)

**3** ACCOUNT # (Ethics Commission filers)

00001564

**4** Date

12/30/2011

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Barker, Bobbie

**6** Contributor address; City; State; Zip Code  
300 Bowie  
#4004  
Austin, TX 78703

**7** Amount of  
contribution (\$)

\$200.00

**8** In-kind contribution  
description (if applicable)

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

**9** Principal occupation / Job title (See Instructions)  
VP of Grants and Community Affairs

**10** Employer (See Instructions)  
St. David's

Date

12/20/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bartam, John and Ashley (\*4)

Contributor address; City; State; Zip Code  
309 McConnell Dr.  
Austin, TX 78746

Amount of  
contribution (\$)

\$700.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Attorney/Attorney

Employer (See Instructions)  
Armbrust & Brown, PLLC/AG's Office

Date

12/08/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bayes, Donald and Karen (\*6)

Contributor address; City; State; Zip Code  
3501 Arrowhead Cir.  
Round Rock, TX 78681

Amount of  
contribution (\$)

\$700.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Director of Construction/Property Manager

Employer (See Instructions)  
Gray Associates/AMI Austin Lofts

Date

12/15/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Beckham, Kimberly and Brian (\*4)

Contributor address; City; State; Zip Code  
11205 Limoncillo Ct.  
Austin, TX 78750

Amount of  
contribution (\$)

\$700.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Attorney/Homemaker

Employer (See Instructions)  
Armbrust & Brown, PLLC/None

Date

12/29/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bell, Hubert

Contributor address; City; State; Zip Code  
170 Beaver Rd.  
Elgin, TX 78621

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 3/25 Report: 5/33

2 FILER NAME Cole, Sheryl (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00001564

4 Date

12/22/2011

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bernstein, Joshua and Erin (\*4)

6 Contributor address; City; State; Zip Code  
801 W. 5th St. #908  
Austin, TX 78703

7 Amount of  
contribution (\$)

\$700.00

8 In-kind contribution  
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)  
Attorney/Homemaker

10 Employer (See Instructions)  
Armbrust & Brown, PLLC/None

Date

12/09/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Betts, Charles

Contributor address; City; State; Zip Code  
14741 Arrowhead Dr  
Austin, TX 78641

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Executive Director

Employer (See Instructions)  
Downtown Austin Alliance

Date

12/14/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Betts, Charles

Contributor address; City; State; Zip Code  
14741 Arrowhead Drive  
Volente, TX 78641

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Executive Director

Employer (See Instructions)  
Downtown Austin Alliance

Date

12/19/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Beuerlein, Steve(\*1)

Contributor address; City; State; Zip Code  
2605 Woodmont Ave  
Austin, TX 78703

Amount of  
contribution (\$)

\$300.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Owner

Employer (See Instructions)  
Burlington Ventures, Inc.

Date

12/30/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Blodgett, Terrell

Contributor address; City; State; Zip Code  
4100 Jackson Ave.  
#250  
Austin, TX 78731

Amount of  
contribution (\$)

\$200.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Professor

Employer (See Instructions)  
UT Austin LBJ School of Public Affairs

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

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

**1** PAGE #

Schedule: 4/25 Report: 6/33

**2** FILER NAME Cole, Sheryl (Mrs.)

**3** ACCOUNT # (Ethics Commission filers)

00001564

**4** Date

12/08/2011

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Brewer, James and Mary (\*6)

**6** Contributor address; City; State; Zip Code  
9504 Prescott Dr.  
Austin, TX 78749

**7** Amount of  
contribution (\$)

\$700.00

**8** In-kind contribution  
description (if applicable)

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

**9** Principal occupation / Job title (See Instructions)  
Project Manager Civil Engineer/Homemaker

**10** Employer (See Instructions)  
Gray Associates/None

Date

12/16/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Brock, Brent Grulke and Kristin

Contributor address; City; State; Zip Code  
2711 Tether Trl  
Austin, TX 78704

Amount of  
contribution (\$)

\$700.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Creative Director/Homemaker

Employer (See Instructions)  
SXSW/None

Date

12/21/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Brown, Frank and Janice (\*4)

Contributor address; City; State; Zip Code  
602 Coquina Lane  
Austin, TX 78746

Amount of  
contribution (\$)

\$700.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Attorney/None

Employer (See Instructions)  
Armbrust Brown/None

Date

12/05/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Brown McCarroll PAC

Contributor address; City; State; Zip Code  
111 Congress Ave.  
# 1400  
Austin, TX 78701

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/26/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Burnett, Michel and Claudia (\*4)

Contributor address; City; State; Zip Code  
1601 Forrest Trl.  
Austin, TX 78703

Amount of  
contribution (\$)

\$700.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Attorney/Employee

Employer (See Instructions)  
Armbrust & Brown, PLLC/Global Talk LLC

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 5/25 Report: 7/33

2 FILER NAME Cole, Sheryl (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00001564

4 Date

12/19/2011

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Byars, Samuel and Anne (\*4)6 Contributor address; City; State; Zip Code  
2103 Schulte Avenue  
Austin, TX 787037 Amount of  
contribution (\$)

\$700.00

8 In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐9 Principal occupation / Job title (See Instructions)  
Attorney/Homemaker10 Employer (See Instructions)  
Armbrust & Brown, PLLC/None

Date

12/13/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
CDM PACContributor address; City; State; Zip Code  
3050 Post Oak Blvd.  
Suite 300  
Houston, TX 77056Amount of  
contribution (\$)

\$350.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/08/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Clark, AntoinetteContributor address; City; State; Zip Code  
2200 Far Gallant Dr  
Austin, TX 78746Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
HomemakerEmployer (See Instructions)  
None

Date

12/07/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Clark, JoanContributor address; City; State; Zip Code  
4210 River Garden Trail  
Austin, TX 78746Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
HomemakerEmployer (See Instructions)  
None

Date

12/07/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Clark, StephenContributor address; City; State; Zip Code  
4210 River Garden Trail  
Austin, TX 78746Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
ChairmanEmployer (See Instructions)  
Cypress Real Estate Advisors

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/25 Report: 8/33	
2 FILER NAME Cole, Sheryl (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00001564	
4 Date  12/08/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Clark, Timothy  6 Contributor address; City; State; Zip Code 2200 Far Gallant Dr Austin, TX 78748	7 Amount of contribution (\$)  \$350.00	8 In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) President		10 Employer (See Instructions) Cypress Real Estate Advisors	
Date  12/12/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Collins, Sharlene and Patrick (*4)  Contributor address; City; State; Zip Code 1400 Yaupon Valley Rd. Austin, TX 78748	Amount of contribution (\$)  \$700.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Attorney/Retired		Employer (See Instructions) Armbrust & Brown, PLLC/None	
Date  12/29/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cook, Michael  Contributor address; City; State; Zip Code Suite 215 Austin, TX	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Cook Brooks Johnson PLLC	
Date  12/28/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Coopwood, Thomas  Contributor address; City; State; Zip Code 6717 Valburn Dr Austin, TX 78731	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  12/09/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cotton, Jim (*1)  Contributor address; City; State; Zip Code 11000 Spicewood Pkwy Austin, TX 78750	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) McAllister and Associates	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 7/25 Report: 9/33

2 FILER NAME Cole, Sheryl (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00001564

4 Date

12/15/2011

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Covington, Bryce Miller and Kristian Covington (\*2)

6 Contributor address; City; State; Zip Code  
8204 Navidad Dr.  
Austin, TX 78735

7 Amount of contribution (\$)

\$700.00

8 In-kind contribution description (if applicable)

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

9 Principal occupation / Job title (See Instructions)  
Managing Principle/None

10 Employer (See Instructions)  
Endeavor Real Estate Group/None

Date

12/28/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Covington, Sid

Contributor address; City; State; Zip Code

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/30/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Cumberbatch, Ashton

Contributor address; City; State; Zip Code  
3 Green Lanes  
Austin, TX 78703

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)  
JR Cumberbatch Productions

Date

12/14/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Curtis, Matt

Contributor address; City; State; Zip Code

Amount of contribution (\$)

\$150.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Home Away

Employer (See Instructions)  
Director of Community Relations

Date

12/12/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Ellis, Chris (\*2)

Contributor address; City; State; Zip Code  
3006 Sparkling Brook Lane  
Austin, TX 78746

Amount of contribution (\$)

\$700.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Managing Principle/Team Supervisor

Employer (See Instructions)  
Endeavor Real Estate Group/ACS

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 8/25 Report: 10/33

2 FILER NAME Cole, Sheryl (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00001564

4 Date  
  
11/30/2011

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Escutia, Charles and Christina

6 Contributor address; City; State; Zip Code  
7604 Fawn Hollow Cove  
Austin, TX 78750

7 Amount of  
contribution (\$)  
  
\$700.00

8 In-kind contribution  
description (if applicable)

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

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

10 Employer (See Instructions)  
Hindsite 20/20 Real Estate Investments

Date

12/11/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Farmer, Gary and Susan

Contributor address; City; State; Zip Code  
309 Lake Cliff Trail  
Austin, TX 78746

Amount of  
contribution (\$)  
  
\$700.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
President/Homemaker

Employer (See Instructions)  
Heritage Title Company of Austin/None

Date

12/13/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Forrest, Hugh (\*3)

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

Amount of  
contribution (\$)  
  
\$700.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Event Director/Homemaker

Employer (See Instructions)  
SXSW/None

Date

12/15/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
George, James (\*1)

Contributor address; City; State; Zip Code  
P.O. Box 685193  
Austin, TX 78768

Amount of  
contribution (\$)  
  
\$300.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
James W. George Attorney at Law

Date

12/15/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Getter, Becky and Kerry

Contributor address; City; State; Zip Code  
1101 E 11th st  
Austin, TX 78702

Amount of  
contribution (\$)  
  
\$700.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Homemaker/CEO

Employer (See Instructions)  
None/Balcones Resources

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 9/25 Report: 11/33

2 FILER NAME Cole, Sheryl (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00001564

4 Date

12/28/2011

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Gilliland, Douglas (\*5)6 Contributor address; City; State; Zip Code  
1805 Buckingham Ct.  
Keller, TX 762627 Amount of  
contribution (\$)

\$350.00

8 In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐9 Principal occupation / Job title (See Instructions)  
Land Developer10 Employer (See Instructions)  
Triwest Enterprises

Date

12/07/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Goodman, Shane (\*6)Contributor address; City; State; Zip Code  
9403 Longvale Dr.  
Austin, TX 78729Amount of  
contribution (\$)

\$300.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
Construction ManagerEmployer (See Instructions)  
D. R. Horton

Date

12/11/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Gray, David and Mary (\*6)Contributor address; City; State; Zip Code  
4307 Dunning Ln.  
Austin, TX 78746Amount of  
contribution (\$)

\$700.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
President/HomemakerEmployer (See Instructions)  
Gray Associates/None

Date

12/28/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Gullahorn, Jack and PattiContributor address; City; State; Zip Code  
P.O. Box 140045  
Austin, TX 78714Amount of  
contribution (\$)

\$700.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
Lobbyist/HomemakerEmployer (See Instructions)  
Public Strategies Inc./None

Date

12/01/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Hariston, EarlContributor address; City; State; Zip Code  
1902 Chestnut Cr  
Round Rock, TX 78281Amount of  
contribution (\$)

\$100.00

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

Employer (See Instructions)



# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The <b>INSTRUCTION GUIDE</b> explains how to complete this form.		<b>1 PAGE #</b> Schedule: 10/25 Report: 12/33	
<b>2 FILER NAME</b> Cole, Sheryl (Mrs.)		<b>3 ACCOUNT #</b> (Ethics Commission filers) 00001564	
<b>4 Date</b>  12/21/2011	<b>5 Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Hawkins, Mark and Kelley (*4)  <b>6 Contributor address; City; State; Zip Code</b> 5805 Carry Back Ln Austin, TX 78745	<b>7 Amount of contribution (\$)</b>  \$700.00	<b>8 In-kind contribution description (if applicable)</b>   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
<b>9 Principal occupation / Job title (See Instructions)</b> Attorney/Homemaker		<b>10 Employer (See Instructions)</b> Armbrust & Brown, PLLC/None	
<b>Date</b>  12/05/2011	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Herring, Stevyn and Katherine (*6)  <b>Contributor address; City; State; Zip Code</b> 2208 Real Catorca Austin, TX 78746	<b>Amount of contribution (\$)</b>  \$500.00	<b>In-kind contribution description (if applicable)</b>   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
<b>Principal occupation / Job title (See Instructions)</b> Fullbright and Jaworski		<b>Employer (See Instructions)</b> Administrator	
<b>Date</b>  12/15/2011	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Heston, Rebecca (*2)  <b>Contributor address; City; State; Zip Code</b> 2307 Fortune Dr. Austin, TX 78704	<b>Amount of contribution (\$)</b>  \$350.00	<b>In-kind contribution description (if applicable)</b>   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
<b>Principal occupation / Job title (See Instructions)</b> Principal and Property Management/Employee		<b>Employer (See Instructions)</b> Endeavor Real Estate /Quick Draw Designs and Drafting	
<b>Date</b>  12/21/2011	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Hobbs, Jeffrey and Lisa (*4)  <b>Contributor address; City; State; Zip Code</b> 3700 Hillbrook Dr. Austin, TX 78731	<b>Amount of contribution (\$)</b>  \$700.00	<b>In-kind contribution description (if applicable)</b>   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
<b>Principal occupation / Job title (See Instructions)</b> Attorney/Attorney		<b>Employer (See Instructions)</b> Armbrust & Brown, PLLC/Vinson & Elkins LLP	
<b>Date</b>  12/21/2011	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Hollingsworth, Wayne and D.P. (*4)  <b>Contributor address; City; State; Zip Code</b> 504 Furlong Dr. Austin, TX 78746	<b>Amount of contribution (\$)</b>  \$700.00	<b>In-kind contribution description (if applicable)</b>   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
<b>Principal occupation / Job title (See Instructions)</b> Attorney/None		<b>Employer (See Instructions)</b> Armbrust Brown/None	

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 11/25 Report: 13/33

2 FILER NAME Cole, Sheryl (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00001564

4 Date

12/13/2011

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Hutto, Denise (\*3)

6 Contributor address; City; State; Zip Code  
1608 B Haskell  
Austin, TX 78702

7 Amount of  
contribution (\$)

\$350.00

8 In-kind contribution  
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)  
Accounting

10 Employer (See Instructions)  
SXSX

Date

12/28/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Jackman, Merl

Contributor address; City; State; Zip Code  
1000 W. 39th St  
Austin, TX 78756

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)  
Optometrist

Employer (See Instructions)  
Texas State Optical

Date

12/11/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Jefferson, Sedora

Contributor address; City; State; Zip Code  
10740 Centennial Trail  
Austin, TX 78726

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
attorney

Employer (See Instructions)  
TASB

Date

12/19/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Jones, Kenneth and Annette (\*4)

Contributor address; City; State; Zip Code  
305 Riley Rd.  
Austin, TX 78746

Amount of  
contribution (\$)

\$700.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Anesthesiologist

Employer (See Instructions)

Date

12/31/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Jones, Michael

Contributor address; City; State; Zip Code  
2045 Zach Scott Street  
Austin, TX 78723

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Real Estate

Employer (See Instructions)  
Oak Hill Real Estate

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #

Schedule: 12/25 Report: 14/33

**2** FILER NAME Cole, Sheryl (Mrs.)

**3** ACCOUNT # (Ethics Commission filers)

00001564

**4** Date

12/12/2011

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
K2 Partners

**6** Contributor address; City; State; Zip Code  
8127 Mesa Dr.  
#206  
Austin, TX 78759

**7** Amount of  
contribution (\$)

\$500.00

**8** In-kind contribution  
description (if applicable)

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

**9** Principal occupation / Job title (See Instructions)

**10** Employer (See Instructions)

Date

12/15/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Koepka, Elizabeth

Contributor address; City; State; Zip Code  
1306 Bentwood  
Austin, TX 78722

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)  
Entertainer

Employer (See Instructions)  
Self

Date

12/20/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Krumme, Gregg and Robin (\*4)

Contributor address; City; State; Zip Code  
10702 Hastings Ln.  
Austin, TX 78750

Amount of  
contribution (\$)

\$700.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Attorney/Attorney

Employer (See Instructions)  
Armbrust & Brow/Martin, Disiere, Jefferson & Wisdom

Date

12/12/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
League, Tim

Contributor address; City; State; Zip Code  
1717 W. Sixth Street  
Suite 351  
Austin, TX 78703

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Founder

Employer (See Instructions)  
Alamo Drafthouse

Date

12/17/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Link, Tom

Contributor address; City; State; Zip Code  
211 E. 7th St.  
Suite 510  
Austin, TX 78701

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Investor

Employer (See Instructions)  
Self

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 13/25 Report: 15/33

2 FILER NAME Cole, Sheryl (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00001564

4 Date

12/12/2011

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Littlefield, Sue (\*4)

6 Contributor address; City; State; Zip Code  
204 Westhaven Dr.  
Austin, TX 78746

7 Amount of  
contribution (\$)

\$350.00

8 In-kind contribution  
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)  
Attorney

10 Employer (See Instructions)  
Armbrust & Brown, PLLC/None

Date

12/28/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Llamas, Joe (\*5)

Contributor address; City; State; Zip Code  
Austin, TX

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)  
Senior Development

Employer (See Instructions)  
McShane Development Co

Date

12/29/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Lorenz, Perry and Sheridan

Contributor address; City; State; Zip Code  
1311 A, East 6th St.  
Austin, TX 78702

Amount of  
contribution (\$)

\$700.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Founder/Housewife

Employer (See Instructions)  
Constuctive Ventures/Community Volunteer

Date

12/27/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Lorenzo, Krause

Contributor address; City; State; Zip Code  
2420 Jarraff Ave.  
Austin, TX 78703

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Best Efforts

Employer (See Instructions)  
Best Efforts

Date

12/16/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Lynk, Steven

Contributor address; City; State; Zip Code  
6004 Ronchamps Dr.  
Round Rock, TX 78681

Amount of  
contribution (\$)

\$250.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Associate

Employer (See Instructions)  
CDM

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 14/25 Report: 16/33

2 FILER NAME Cole, Sheryl (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00001564

4 Date

12/01/2011

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Maier, Richard (\*6)6 Contributor address; City; State; Zip Code  
704 E. 45th 1/2 St.  
Austin, TX 787517 Amount of  
contribution (\$)

\$350.00

8 In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐9 Principal occupation / Job title (See Instructions)  
Vice President and Land Manager10 Employer (See Instructions)  
D.R. Horton

Date

12/15/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Majewski, George and CarlynContributor address; City; State; Zip Code  
1800 Parkside Ln  
Austin, TX 78745Amount of  
contribution (\$)

\$700.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
Product Planner/NoneEmployer (See Instructions)  
Coinstar/None

Date

12/14/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Mardegian, Scott Wilcox and Rachael (\*3)Contributor address; City; State; Zip Code  
2507 Cascade Dr.  
Austin, TX 78757Amount of  
contribution (\$)

\$700.00

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

Date

12/12/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Marsh, CharlesContributor address; City; State; Zip Code  
2212 East Windsor Rd.  
Austin, TX 78703Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
PrincipalEmployer (See Instructions)  
Endeavor Real Estate Group

Date

11/30/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Martin, KennethContributor address; City; State; Zip Code  
1100 Lexington Cr  
DeSoto, TX 75115Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
AttorneyEmployer (See Instructions)  
Kenneth D Martin & Associates

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 15/25 Report: 17/33	
2 FILER NAME Cole, Sheryl (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00001564	
4 Date  12/16/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mathias, Matt (*1)  6 Contributor address; City; State; Zip Code 2915 Regents Park Austin, TX 78746	7 Amount of contribution (\$)  \$250.00	8 In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Founder		10 Employer (See Instructions) Matt Mathias & Company	
Date  12/01/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McClendon, Burwell and Terri (*6)  Contributor address; City; State; Zip Code 1905 Canonera Austin, TX 78746	Amount of contribution (\$)  \$700.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Real Estate/Homemaker		Employer (See Instructions) DR Horton/None	
Date  11/30/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McDaniels, Demetrius  Contributor address; City; State; Zip Code 7601 Sandia Loop Austin, TX 78735	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Lobbyist		Employer (See Instructions) Greenberg Traurig LLP	
Date  12/14/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McDonald, Katrina (*6)  Contributor address; City; State; Zip Code 11802 Nene Dr. Austin, TX 78750	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  12/30/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Means, Bertha  Contributor address; City; State; Zip Code 7400 Valburn Dr Austin, TX 78731	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 16/25 Report: 18/33	
2 FILER NAME Cole, Sheryl (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00001564	
4 Date  12/20/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mendiola, Darin Klein and Natalie (*3)  6 Contributor address; City; State; Zip Code 4419 Barrow Austin, TX 78751	7 Amount of contribution (\$)  \$700.00	8 In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Producer/Best Efforts		10 Employer (See Instructions) SXSW/Best Efforts	
Date  12/12/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Momim, Naseem  Contributor address; City; State; Zip Code 1532 Visalia Ln. Austin, TX 78727	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self	
Date  12/15/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Momin, Amin  Contributor address; City; State; Zip Code 11800 Metric Blvd. Austin, TX 78758	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Convenient Store Travel Mart	
Date  12/20/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moore, Alan and Martha  Contributor address; City; State; Zip Code 2420 Harris Boulevard Austin, TX 78703	Amount of contribution (\$)  \$700.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Principal/Best Efforts		Employer (See Instructions) MHMATM LLC/Best Efforts	
Date  12/30/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morrison, Gregory  Contributor address; City; State; Zip Code 9310 Le Conte Cove Austin, TX 78749	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

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

**1 PAGE #**

Schedule: 17/25 Report: 19/33

**2 FILER NAME** Cole, Sheryl (Mrs.)

**3 ACCOUNT #** (Ethics Commission filers)

00001564

**4 Date**

12/12/2011

**5 Full name of contributor** ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Nassour, Jimmy (\*1)

**6 Contributor address; City; State; Zip Code**  
3839 Bee Cave Road  
Suite 200  
Westlake Hills, TX 78746

**7 Amount of contribution (\$)**

\$350.00

**8 In-kind contribution description (if applicable)**

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

**9 Principal occupation / Job title (See Instructions)**  
Lawyer

**10 Employer (See Instructions)**  
Jimmy Nassour Law Office

**Date**

12/23/2011

**Full name of contributor** ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Needham, John

**Contributor address; City; State; Zip Code**  
100 Congress Ave.  
#780  
Austin, TX 78701

**Amount of contribution (\$)**

\$700.00

**In-kind contribution description (if applicable)**

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

**Principal occupation / Job title (See Instructions)**  
Owner/Best Efforts

**Employer (See Instructions)**  
Riverside Resources/Best Efforts

**Date**

12/14/2011

**Full name of contributor** ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Newberg, Jeffrey (\*2)

**Contributor address; City; State; Zip Code**  
3830 Hunterwood Point  
Austin, TX 78746

**Amount of contribution (\$)**

\$700.00

**In-kind contribution description (if applicable)**

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

**Principal occupation / Job title (See Instructions)**  
Real Estate/Director

**Employer (See Instructions)**  
Endeavor Real Estate Center for Convenatal Judaism

**Date**

12/12/2011

**Full name of contributor** ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Nikkels, Jason and Audrey (\*6)

**Contributor address; City; State; Zip Code**  
1762 Lookout Forest  
San Antonio, TX 78260

**Amount of contribution (\$)**

\$700.00

**In-kind contribution description (if applicable)**

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

**Principal occupation / Job title (See Instructions)**  
Branch Manager/None

**Employer (See Instructions)**  
DNT Construction/None

**Date**

12/01/2011

**Full name of contributor** ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Nortey, James

**Contributor address; City; State; Zip Code**  
111 Congress Avenue  
#1700  
Austin, TX 78701

**Amount of contribution (\$)**

\$350.00

**In-kind contribution description (if applicable)**

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

**Principal occupation / Job title (See Instructions)**  
Associate

**Employer (See Instructions)**  
Andrews Kurth LLP



# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #

Schedule: 18/25 Report: 20/33

**2** FILER NAME Cole, Sheryl (Mrs.)

**3** ACCOUNT # (Ethics Commission filers)

00001564

**4** Date

12/10/2011

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Oppenheimer, Richard

**6** Contributor address; City; State; Zip Code  
6102 Mt. Villa Cove  
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)

**10** Employer (See Instructions)

Date

12/20/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Ott, David (\*5)

Contributor address; City; State; Zip Code  
3731 University Blvd.  
Austin, TX 77005

Amount of  
contribution (\$)

\$250.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Architect

Employer (See Instructions)  
The Hanover Company

Date

12/14/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Pastor, Andrew (\*2)

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

Amount of  
contribution (\$)

\$700.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Managing Director and Principle

Employer (See Instructions)  
Endeavor Real Estate Group

Date

12/12/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Patel, Abdul

Contributor address; City; State; Zip Code  
1805 Far Gallant Dr.  
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)  
Business Owner

Employer (See Instructions)  
Sunruse Mini Mart

Date

12/15/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Patel, Abdul

Contributor address; City; State; Zip Code  
1805 Far Gallant Dr.  
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)  
Business owner

Employer (See Instructions)  
Sunrise Mini Mart

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 19/25 Report: 21/33

2 FILER NAME Cole, Sheryl (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00001564

4 Date

12/17/2011

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Pollan, Thomas

6 Contributor address; City; State; Zip Code  
4017 Walnut Clay Drive  
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)  
Attorney

10 Employer (See Instructions)  
Bickerstaff

Date

12/15/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Purcell, Fred (\*1)

Contributor address; City; State; Zip Code  
12912 Park Drive  
Austin, TX 78732

Amount of  
contribution (\$)

\$300.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Owner

Employer (See Instructions)  
Lane Humboldt Construction

Date

12/25/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Reagan, Daniel

Contributor address; City; State; Zip Code  
2022 Laird Dr.  
Salt Lake City, UT 84108

Amount of  
contribution (\$)

\$700.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Management/Homemaker

Employer (See Instructions)  
Reagan National Advertising/None

Date

12/14/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Reagan, Frances

Contributor address; City; State; Zip Code  
1475 Federal Heights Dr.  
Salt Lake City, UT 84103-4443

Amount of  
contribution (\$)

\$700.00

In-kind contribution  
description (if applicable)

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

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

Employer (See Instructions)  
Self/Self

Date

12/30/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Reagan, William

Contributor address; City; State; Zip Code  
4100 McBrine Pl  
Austin, TX 78746

Amount of  
contribution (\$)

\$700.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
President/Consultant

Employer (See Instructions)  
Reagan National Advertising

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 20/25 Report: 22/33	
2 FILER NAME Cole, Sheryl (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00001564	
4 Date  12/30/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reese, Andrew (*5)  6 Contributor address; City; State; Zip Code 2914 Regents Park Austin, TX 78746	7 Amount of contribution (\$)  \$150.00	8 In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  12/27/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reese, Donald and Gina (*5)  Contributor address; City; State; Zip Code 100 Congress Ave. #780 Austin, TX 78701	Amount of contribution (\$)  \$700.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Investor/None		Employer (See Instructions) Self/None	
Date  12/28/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Renbarger, Grace  Contributor address; City; State; Zip Code	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  12/21/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Schweitzer, John  Contributor address; City; State; Zip Code 3105 Above Stratford Pl Austin, TX 78746	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Campbell Capital LTD	
Date  12/21/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Scrafford, Bruce and Nora (*4)  Contributor address; City; State; Zip Code 105 Brooks Hollow Lakeway, TX 78734	Amount of contribution (\$)  \$700.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Attorney/Homemaker		Employer (See Instructions) Armbrust & Brown, PLLC/None	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 21/25 Report: 23/33

2 FILER NAME Cole, Sheryl (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00001564

4 Date

12/29/2011

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Siff, Ted

6 Contributor address; City; State; Zip Code  
604 West 11th  
Austin, TX 78701

7 Amount of  
contribution (\$)

\$100.00

8 In-kind contribution  
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

12/09/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Smaha, Steve

Contributor address; City; State; Zip Code  
5003 Lucas Lane  
Austin, TX 78731

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Consultant

Employer (See Instructions)  
Self-employed

Date

12/15/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Smith, David Smith and Karen Eckert (\*4)

Contributor address; City; State; Zip Code  
100 Congress Ave.  
#300  
Austin, TX 78701

Amount of  
contribution (\$)

\$700.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Attorney/University of Texas

Employer (See Instructions)  
Armbrust & Brown/Lab Technician

Date

12/23/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Smitheal, Jeremy and Ellen

Contributor address; City; State; Zip Code  
100 Congress Ave.  
#780  
Austin, TX 78701

Amount of  
contribution (\$)

\$700.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Manager/Employee

Employer (See Instructions)  
Riverside Resources/Whitzman Management Corp

Date

12/18/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Speck, Lawrence

Contributor address; City; State; Zip Code  
800 West 5th St.  
#1102  
Austin, TX 78703

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Professor

Employer (See Instructions)  
UT Austin School of Architecture

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #

Schedule: 22/25 Report: 24/33

**2** FILER NAME Cole, Sheryl (Mrs.)

**3** ACCOUNT # (Ethics Commission filers)

00001564

**4** Date

12/19/2011

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Sples, Brad (\*3)

**6** Contributor address; City; State; Zip Code  
1212 Guadalupe St.  
#802  
Austin, TX 78701

**7** Amount of  
contribution (\$)

\$350.00

**8** In-kind contribution  
description (if applicable)

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

**9** Principal occupation / Job title (See Instructions)  
Marketing

**10** Employer (See Instructions)  
SXSX

Date

12/21/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Stacy, Tom and Melinda

Contributor address; City; State; Zip Code  
823 Congress Ave Suite 1111  
Austin, TX 78701

Amount of  
contribution (\$)

\$700.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Owner/Office Manager

Employer (See Instructions)  
T. Stacy and Associates/T. Stacy and Associates

Date

12/30/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Stuart, Donald (\*5)

Contributor address; City; State; Zip Code  
4105 Long Champ Dr.  
Austin, TX 78746

Amount of  
contribution (\$)

\$250.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Metcalf, Wolff, Stuart and Williams

Date

12/15/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Suman, Ron

Contributor address; City; State; Zip Code  
P.O. Box 4181  
Austin, TX 78765

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)  
Sales Manager

Employer (See Instructions)  
SXSX

Date

12/20/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Taylor, Scott and Kim (\*4)

Contributor address; City; State; Zip Code  
10919 Enchanted Rock Cove  
Austin, TX 78726

Amount of  
contribution (\$)

\$700.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Attorney/Homemaker

Employer (See Instructions)  
Armbrust & Brown, PLLC/None

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

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

**1** PAGE #

Schedule: 23/25 Report: 25/33

**2** FILER NAME Cole, Sheryl (Mrs.)

**3** ACCOUNT # (Ethics Commission filers)

00001564

**4** Date

12/15/2011

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Tomme, Dean and Marci (6\*)

**6** Contributor address; City; State; Zip Code  
P.O. Box 467  
Lampasas, TX 76550

**7** Amount of  
contribution (\$)

\$700.00

**8** In-kind contribution  
description (if applicable)

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

**9** Principal occupation / Job title (See Instructions)  
VP/None

**10** Employer (See Instructions)  
DNT Construction/None

Date

12/09/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Troilo, Arthur

Contributor address; City; State; Zip Code  
700 E. 11th Street  
#300  
Austin, TX 78701

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/10/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Wainwright, Jon

Contributor address; City; State; Zip Code  
4109 Ave F  
Austin, TX 78751

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Economist

Employer (See Instructions)  
MMC

Date

12/28/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Wheeler, Richard

Contributor address; City; State; Zip Code  
1903 A, Crested Butte Dr.  
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)  
Director

Employer (See Instructions)  
Lakeway/Lohmans Investments, Inc.

Date

12/14/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
White, Neel and Pam

Contributor address; City; State; Zip Code  
4220 River Garden Trail  
Austin, TX 78746

Amount of  
contribution (\$)

\$700.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
President & CEO/None

Employer (See Instructions)  
White Construction/None

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 24/25 Report: 26/33

2 FILER NAME Cole, Sheryl (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00001564

4 Date

12/16/2011

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Wiginton, Don Kent and Jeannie (\*3)

6 Contributor address; City; State; Zip Code  
908 E. Live Oak St.  
Austin, TX 78704

7 Amount of  
contribution (\$)

\$700.00

8 In-kind contribution  
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)  
None/Client Service Manager

10 Employer (See Instructions)  
None/CDM Smith

Date

12/11/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Wilcox, Mike Shea and Toni

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

Amount of  
contribution (\$)

\$700.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Executive Director/Homemaker

Employer (See Instructions)  
SXSW/None

Date

12/29/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Williams, Talley (\*5)

Contributor address; City; State; Zip Code  
8209 Dark Ridge Cove  
Austin, TX 78737

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)  
Partner

Employer (See Instructions)  
Metcalfe, Wolff, Stuart and Williams

Date

12/15/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Woelke, Allen and Nancy

Contributor address; City; State; Zip Code  
4101 Galacia Dr.  
Austin, TX 78759

Amount of  
contribution (\$)

\$700.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
VP/None

Employer (See Instructions)  
Camp Dresser & Mc Kee Inc/None

Date

12/30/2011

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

Contributor address; City; State; Zip Code  
1206 W. 8th St.  
Austin, TX 78701

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Partner

Employer (See Instructions)  
Golden Stuart & Wolff LLP

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

**1 PAGE #**

Schedule: 25/25 Report: 27/33

**2 FILER NAME** Cole, Sheryl (Mrs.)**3 ACCOUNT #** (Ethics Commission filers)

00001564

**4 Date**

12/01/2011

**5 Full name of contributor** ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Zarbock, Kent (\*6)**6 Contributor address; City; State; Zip Code**  
705 W. Rim Dr.  
Austin, TX 78731**7 Amount of  
contribution (\$)**

\$200.00

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



**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.

<b>1 PAGE #</b> Schedule: 1/6 Report: 28/33		<b>2 FILER NAME</b> Cole, Sheryl (Mrs.)		<b>3 ACCOUNT # (TEC filers)</b> 00001564	
<b>4 Date</b> 11/30/2011	<b>5 Payee name</b> Adisa Communications				
<b>6 Amount (\$)</b> \$2,800.00	<b>7 Payee address City; State; Zip Code</b> 13492 Research Blvd. #120-631 Austin, TX 78750				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category (See Categories listed at the top of this schedule)</b> Consulting Expense		<b>(b) Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Announcement Media		
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 12/20/2011	<b>Payee name</b> Adisa Communications				
<b>Amount (\$)</b> \$558.00	<b>Payee address City; State; Zip Code</b> 13492 Research Blvd. #120-631 Austin, TX 78750				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Consulting Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Reimbursement for Campaign Expenses		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 12/30/2011	<b>Payee name</b> Adisa Communications				
<b>Amount (\$)</b> \$6,000.00	<b>Payee address City; State; Zip Code</b> 13492 Research Blvd. #120-631 Austin, TX 78750				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Consulting Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Social Media/Website		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 12/17/2011	<b>Payee name</b> Central Market				
<b>Amount (\$)</b> \$127.00	<b>Payee address City; State; Zip Code</b> 4001 N. Lamar Austin, TX 78756				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Food/Beverage Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Staff lunch		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	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.

<b>1 PAGE #</b> Schedule: 2/6 Report: 29/33		<b>2 FILER NAME</b> Cole, Sheryl (Mrs.)		<b>3 ACCOUNT #</b> (TEC filers) 00001564	
<b>4 Date</b> 11/22/2011		<b>5 Payee name</b> H. Green Photography			
<b>6 Amount (\$)</b> \$100.00		<b>7 Payee address</b> City; State; Zip Code 2906 MLK Blvd. Austin, TX 78702			
<b>8 PURPOSE OF EXPENDITURE</b>		<b>(a) Category</b> (See Categories listed at the top of this schedule) Advertising Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event photos	
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 08/01/2011		<b>Payee name</b> Jitahidi, Joia			
<b>Amount (\$)</b> \$750.00		<b>Payee address</b> City; State; Zip Code 5114 Balcones Woods Dr. Austin, TX 78759			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) Consulting Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Media/Communications	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 08/29/2011		<b>Payee name</b> Jitahidi, Joia			
<b>Amount (\$)</b> \$750.00		<b>Payee address</b> City; State; Zip Code 5114 Balcones Woods Dr. Austin, TX 78759			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) Consulting Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Media/Communications	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 12/30/2011		<b>Payee name</b> Jitahidi, Joia			
<b>Amount (\$)</b> \$1,500.00		<b>Payee address</b> City; State; Zip Code 5114 Balcones Woods Dr. Austin, TX 78759			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) Consulting Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Media/Communications	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought: Office held:	

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 3/6 Report: 30/33	<b>2 FILER NAME</b> Cole, Sheryl (Mrs.)	<b>3 ACCOUNT # (TEC filers)</b> 00001564
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<b>4 Date</b> 11/30/2011	<b>5 Payee name</b> Lankes, Matt
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<b>6 Amount (\$)</b> \$250.00	<b>7 Payee address</b> City; State; Zip Code P. O. Box 300045 Austin, TX 78703
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<b>8 PURPOSE OF EXPENDITURE</b>	(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"/> Announcement event photography
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<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name	Office sought:	Office held:
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<b>Date</b> 11/11/2011	<b>Payee name</b> Larson, Joanne
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<b>Amount (\$)</b> \$69.00	<b>Payee address</b> City; State; Zip Code 8023 Lydia St. Austin, TX 78702
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Catering
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<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name	Office sought:	Office held:
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<b>Date</b> 12/05/2011	<b>Payee name</b> League of Women Voters
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<b>Amount (\$)</b> \$60.00	<b>Payee address</b> City; State; Zip Code 1011 W 31st St # 510 Austin, TX 78705
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) OTHER	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Membership fee
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<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name	Office sought:	Office held:
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<b>Date</b> 12/30/2011	<b>Payee name</b> Love, Claire
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<b>Amount (\$)</b> \$750.00	<b>Payee address</b> City; State; Zip Code 2006 Sandberg Dr. Austin, TX 78752
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<b>PURPOSE OF EXPENDITURE</b>	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"/> Administrative Assistant
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<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name	Office sought:	Office held:
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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 4/6 Report: 31/33		<b>2 FILER NAME</b> Cole, Sheryl (Mrs.)		<b>3 ACCOUNT # (TEC filers)</b> 00001564	
<b>4 Date</b> 07/05/2011		<b>5 Payee name</b> McDonald, Stephanie			
<b>6 Amount (\$)</b> \$37.87		<b>7 Payee address</b> City: State: Zip Code 802 Town Lake Blvd. Austin, TX 78704			
<b>8 PURPOSE OF EXPENDITURE</b>		<b>(a) Category</b> (See Categories listed at the top of this schedule) Food/Beverage Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Reimbursement	
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought:	Office held:
<b>Date</b> 12/30/2011		<b>Payee name</b> Message, Audience and Presentation			
<b>Amount (\$)</b> \$2,500.00		<b>Payee address</b> City: State: Zip Code 2400 S. 4th St. Austin, TX 78704			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) Consulting Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political strategy	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought:	Office held:
<b>Date</b> 08/29/2011		<b>Payee name</b> NAACP			
<b>Amount (\$)</b> \$150.00		<b>Payee address</b> City: State: Zip Code 1704 E. 12th St Austin, TX 78702			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contribution/Donation	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought:	Office held:
<b>Date</b> 11/27/2011		<b>Payee name</b> Office Depot			
<b>Amount (\$)</b> \$193.00		<b>Payee address</b> City: State: Zip Code 13201 Ranch Road 620 Austin, TX 78717			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Office supplies	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		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.

<b>1 PAGE #</b> Schedule: 5/6 Report: 32/33		<b>2 FILER NAME</b> Cole, Sheryl (Mrs.)		<b>3 ACCOUNT # (TEC filers)</b> 00001564
<b>4 Date</b> 11/30/2011	<b>5 Payee name</b> Pay Pal			
<b>6 Amount (\$)</b> \$1.13	<b>7 Payee address</b> City: State; Zip Code 2211 N. 1st St. Austin, CA 95131			
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Fees		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fees for online contributions	
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:
<b>Date</b> 12/31/2011	<b>Payee name</b> Pay Pal			
<b>Amount (\$)</b> \$3.05	<b>Payee address</b> City: State; Zip Code 2211 N. 1st St. San Jose, CA 95131			
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Fees		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fees for online contributions	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:
<b>Date</b> 12/30/2011	<b>Payee name</b> Rylo Consulting			
<b>Amount (\$)</b> \$4,000.00	<b>Payee address</b> City: State; Zip Code 908 E. 5th St. Suite 210 Austin, TX 78702			
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fund raising activities	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:
<b>Date</b> 09/30/2011	<b>Payee name</b> South Austin Democrats			
<b>Amount (\$)</b> \$250.00	<b>Payee address</b> City: State; Zip Code PO Box 152592 Austin, TX 78715			
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political contributions	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	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.

<b>1 PAGE #</b> Schedule: 6/6 Report: 33/33		<b>2 FILER NAME</b> Cole, Sheryl (Mrs.)		<b>3 ACCOUNT # (TEC filers)</b> 00001564
<b>4 Date</b> 08/29/2011	<b>5 Payee name</b> Urban League			
<b>6 Amount (\$)</b> \$175.00	<b>7 Payee address</b> City; State; Zip Code 1033 LA Posada Dr Ste 150 Austin, TX			
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category (See Categories listed at the top of this schedule)</b> Food/Beverage Expense		<b>(b) Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Tickets and Banquet	
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:
<b>Date</b> 11/30/2011	<b>Payee name</b> Word of Mouth Catering			
<b>Amount (\$)</b> \$500.00	<b>Payee address</b> City; State; Zip Code 919 West 12th Austin, TX 78701			
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Food/Beverage Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Announcement event catering	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:

**SCHEDULE V - attach to form C/OH**  
**PERSONS SOLICITING CONTRIBUTIONS ON YOUR BEHALF**  
**Reference 2-2-14, Austin City Code**

**Enter the name and address of any person who has solicited and obtained contributions on your behalf, during the reporting period, of \$200 per person from five or more individuals. (You need not include individuals who raise funds totaling \$5,000 or less through a fundraising event in that individual's residence.)**

**Name of person soliciting**  
**Contributions:** Alice Glasco  
**Address:** 5117 Valburn Ct., Austin, TX, 78731

**Name of person soliciting**  
**Contributions:** Andrew Pastor  
**Address:** 2908 Sparkling Brook Lane., Austin, TX, 78746

**Name of person soliciting**  
**Contributions:** Jeannie Wiginton  
908 E. Live Oak St., Austin, TX, 78704

**Name of person soliciting**  
**Contributions:** David Armbrust  
**Address:** 2807 Regents Park Austin, TX, 78746

**Name of person soliciting**  
**Contributions:** Donald Reese  
**Address:** 100 Congress Ave., #780., Austin, TX, 78701

**Name of person soliciting**  
**Contributions:** Richard Maier  
**Address:** 704 E. 45<sup>th</sup> St., Austin, TX, 78751

**Name of person soliciting**  
**Contributions:** Michael Whelan  
4800 Laurel Canyon Dr., Austin, TX, 78731

2012

# 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)  
00000005

2 PAGE #  
1 of 32

3 CANDIDATE /  
OFFICEHOLDER  
NAME

MS / MRS /

MI

SUFFIX

4 CANDIDATE /  
OFFICEHOLDER  
MAILING  
ADDRESS

STATE: ZIP CODE

☐ Change

5 CAMPAIGN  
TREASURER  
NAME

MI

SUFFIX

## OFFICE USE ONLY

Date Received

Date Hand-delivered to Date Postmarked

Receipt #

Amount

Date Processed

Date Imaged

6 CAMPAIGN  
TREASURER  
ADDRESS  
(Residence or business)

ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE  
600 Congress Avenue  
Suite 2800  
Austin, TX 78701

7 CAMPAIGN  
TREASURER  
PHONE

AREA CODE PHONE NUMBER EXTENSION  
(512) 615-1207

8 REPORT TYPE

☒ January 15 ☐ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (officeholder only)  
☐ July 15 ☐ 8th day before election ☐ Exceeded \$500 limit ☐ Final report (Attach C/OH - FR)

9 PERIOD  
COVERED

Month Day Year THROUGH Month Day Year  
11/14/2011 12/31/2011

10 ELECTION

ELECTION DATE ELECTION TYPE  
Month Day Year ☐ Primary ☐ Runoff ☒ General ☐ Special  
05/12/2012

11 OFFICE

OFFICE HELD (if any)  
Austin City Council District 5

12 OFFICE SOUGHT (if known)  
Austin City Council District 5

GO TO PAGE 2



2012

**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)  
00000005**2 PAGE #**  
1 of 32**3 CANDIDATE /  
OFFICEHOLDER  
NAME**MS / MRS / MR  
Dr.FIRST  
William

MI

NICKNAME  
BillLAST  
Spelman

SUFFIX

**OFFICE USE ONLY**

Date Received

2012 JAN 17 PM 3 15  
AUSTIN CITY CLERK  
RECEIVED

Date Hand-delivered Date Postmarked

Receipt #

Amount

Date Processed

Date Imaged

**4 CANDIDATE /  
OFFICEHOLDER  
MAILING  
ADDRESS**

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

P.O. Box 2284  
Austin, TX 78768☐ Change of Address**5 CAMPAIGN  
TREASURER  
NAME**

MS / MRS / MR

FIRST

MI

Ms.

Martha

NICKNAME

LAST

SUFFIX

Smiley

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

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

600 Congress Avenue  
Suite 2800  
Austin, TX 78701**7 CAMPAIGN  
TREASURER  
PHONE**

AREA CODE

PHONE NUMBER

EXTENSION

(512) 615-1207

**8 REPORT TYPE**

January 15



30th day before election



Runoff

15th day after campaign treasurer  
appointment (officeholder only)

July 15



8th day before election



Exceeded \$500 limit



Final report (Attach C/OH - FR)

**9 PERIOD  
COVERED**

Month

Day

Year

Month

Day

Year

11/14/2011

THROUGH

12/31/2011

**10 ELECTION**

ELECTION DATE

Month

Day

Year

05/12/2012

ELECTION TYPE



Primary



Runoff



General



Special

**11 OFFICE**

OFFICE HELD (if any)

Austin City Council District 5

**12 OFFICE SOUGHT (if known)**

Austin City Council District 5

**GO TO PAGE 2**

**CANDIDATE / OFFICEHOLDER REPORT:  
SUPPORT & TOTALS****FORM C/OH  
COVER SHEET PG 2****13 C/OH NAME** *Spelman, William (Dr.)***14 ACCOUNT #** (Ethics Commission filers)  
00000005**15 NOTICE  
FROM  
POLITICAL  
COMMITTEE(S)**

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

COMMITTEE TYPE

COMMITTEE NAME

☐ GENERAL

COMMITTEE ADDRESS

☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

☐ additional pages

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)

\$ 31,460.00

**EXPENDITURE  
TOTALS**

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

\$ 0.00

4. TOTAL POLITICAL EXPENDITURES

\$ 6,438.76

**CONTRIBUTION  
BALANCE**5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE  
LAST DAY OF THE REPORTING PERIOD

\$ 25,521.24

**OUTSTANDING  
LOAN TOTALS**6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE  
LAST DAY OF THE REPORTING PERIOD

\$ 500.00

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

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said William Spelman, this the 17 day  
of January, 2012, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Print name of officer administering oath

Title of officer administering oath

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

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

**1** PAGE #

Schedule: 1/27 Report: 3/32

**2** FILER NAME Spelman, William (Dr.)

**3** ACCOUNT # (Ethics Commission filers)  
00000005

**4** Date

12/12/2011

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Abell, William

**6** Contributor address; City; State; Zip Code  
1607 Kerr Street  
Austin, TX 78704

**7** Amount of  
contribution (\$)

\$100.00

**8** In-kind contribution  
description (if applicable)

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

**9** Principal occupation / Job title (See Instructions)

**10** Employer (See Instructions)

Date

12/08/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Adams, Jim

Contributor address; City; State; Zip Code  
515 Congress Avenue  
Suite 1600  
Austin, TX 78701

Amount of  
contribution (\$)

\$150.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/28/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Anderson, David

Contributor address; City; State; Zip Code  
1515 Oxford Avenue  
Austin, TX 78704

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Principal

Employer (See Instructions)  
FORM Sustainable Planning & Community Design

Date

12/31/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Armbrust, Cheryl

Contributor address; City; State; Zip Code  
2807 Regents Park  
Austin, TX 78746

Amount of  
contribution (\$)

\$25.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/31/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Armbrust, David

Contributor address; City; State; Zip Code  
2807 Regents Park  
Austin, TX 78746

Amount of  
contribution (\$)

\$25.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 2/27 Report: 4/32

2 FILER NAME Spelman, William (Dr.)

3 ACCOUNT # (Ethics Commission filers)

00000005

4 Date

12/21/2011

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Armstrong, Alfred

6 Contributor address; City; State; Zip Code  
9716 Crenata Cove  
Austin, TX 78759

7 Amount of  
contribution (\$)

\$50.00

8 In-kind contribution  
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

12/28/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Ausley, Tom

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

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/23/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Ayres, Robert

Contributor address; City; State; Zip Code  
2408 Keating Lane  
Austin, TX 78703

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Managing Partner

Employer (See Instructions)  
Shield Ranch

Date

12/19/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Baer, Therese

Contributor address; City; State; Zip Code  
5904 Mountainclimb Drive  
Apartment 1  
Austin, TX 78731

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
President

Employer (See Instructions)  
Baer Engineering

Date

12/31/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bartram, Ashley

Contributor address; City; State; Zip Code  
309 McConnell 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)  
\*Attorney

Employer (See Instructions)  
Texas Attorney General

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 3/27 Report: 5/32

2 FILER NAME Spelman, William (Dr.)

3 ACCOUNT # (Ethics Commission filers)

00000005

4 Date

12/31/2011

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bartram, John

6 Contributor address; City; State; Zip Code  
309 McConnell Drive  
Austin, TX 78746

7 Amount of  
contribution (\$)

\$350.00

8 In-kind contribution  
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)  
\*Attorney

10 Employer (See Instructions)  
Armbrust & Brown

Date

12/19/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Baum, Gerald

Contributor address; City; State; Zip Code  
8608 Tallwood Drive  
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)

Employer (See Instructions)

Date

12/31/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Beckham, Brian

Contributor address; City; State; Zip Code  
11205 Limoncillo Court  
Austin, TX 78750

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
\*None

Employer (See Instructions)  
None

Date

12/31/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Beckham, Kimberly

Contributor address; City; State; Zip Code  
11205 Limoncillo Court  
Austin, TX 78750

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
\*Attorney

Employer (See Instructions)  
Armbrust & Brown

Date

11/30/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bercu, Steve

Contributor address; City; State; Zip Code  
4108 Burnet Road  
Austin, TX 78756

Amount of  
contribution (\$)

\$50.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #

Schedule: 4/27 Report: 6/32

**2** FILER NAME Spelman, William (Dr.)

**3** ACCOUNT # (Ethics Commission filers)

00000005

**4** Date

12/31/2011

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bernstein, Erin

**6** Contributor address; City; State; Zip Code  
805 West 5th Street  
Apt. 908  
Austin, TX 78701

**7** Amount of  
contribution (\$)

\$350.00

**8** In-kind contribution  
description (if applicable)

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

**9** Principal occupation / Job title (See Instructions)  
\*None

**10** Employer (See Instructions)  
None

Date

12/31/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bernstein, Joshua

Contributor address; City; State; Zip Code  
805 West 5th Street  
Apt. 908  
Austin, TX 78701

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
\*Attorney

Employer (See Instructions)  
Armbrust & Brown

Date

11/28/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Betts, Charlie

Contributor address; City; State; Zip Code  
14741 Arrowhead Drive  
Volente, TX 78641

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)  
Executive Director

Employer (See Instructions)  
Downtown Austin Alliance

Date

12/26/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Beuerlein, Steve

Contributor address; City; State; Zip Code  
2605 Woodmont Avenue  
Austin, TX 78703

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Owner

Employer (See Instructions)  
Burlington Ventures, Inc.

Date

12/22/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Black, Sinclair

Contributor address; City; State; Zip Code  
208 West 4th Street  
Austin, TX 78701

Amount of  
contribution (\$)

\$250.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Architect

Employer (See Instructions)  
Black & Vernooy

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

**1 PAGE #**

Schedule: 5/27 Report: 7/32

**2 FILER NAME** Spelman, William (Dr.)

**3 ACCOUNT #** (Ethics Commission filers)

00000005

**4 Date**

12/24/2011

**5 Full name of contributor** ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Blodgett, Terrell

**6 Contributor address; City; State; Zip Code**  
4100 Jackson Avenue  
Apt. 250  
Austin, TX 78731

**7 Amount of  
contribution (\$)**

\$200.00

**8 In-kind contribution  
description (if applicable)**

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

**9 Principal occupation / Job title (See Instructions)**  
Professor

**10 Employer (See Instructions)**  
University of Texas

**Date**

12/22/2011

**Full name of contributor** ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bonewald, Silona

**Contributor address; City; State; Zip Code**  
901 West 30th Street  
Austin, TX 78705

**Amount of  
contribution (\$)**

\$50.00

**In-kind contribution  
description (if applicable)**

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

**Principal occupation / Job title (See Instructions)**

**Employer (See Instructions)**

**Date**

12/31/2011

**Full name of contributor** ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Brown, Frank

**Contributor address; City; State; Zip Code**  
602 Coquina Lane  
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)**  
\*Attorney

**Employer (See Instructions)**  
Armbrust & Brown

**Date**

12/31/2011

**Full name of contributor** ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Brown, Janice

**Contributor address; City; State; Zip Code**  
602 Coquina Lane  
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)**  
\*College Selection Consultant

**Employer (See Instructions)**  
Self

**Date**

12/05/2011

**Full name of contributor** ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Brown McCarroll Political Action Committee

**Contributor address; City; State; Zip Code**  
111 Congress Avenue  
Suite 1400  
Austin, TX 78701

**Amount of  
contribution (\$)**

\$350.00

**In-kind contribution  
description (if applicable)**

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

**Principal occupation / Job title (See Instructions)**

**Employer (See Instructions)**

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #

Schedule: 6/27 Report: 8/32

**2** FILER NAME Spelman, William (Dr.)

**3** ACCOUNT # (Ethics Commission filers)

00000005

**4** Date

12/29/2011

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Buie, Jed

**6** Contributor address; City; State; Zip Code  
7905 Goldenrod Cove  
Austin, TX 78750

**7** Amount of  
contribution (\$)

\$25.00

**8** In-kind contribution  
description (if applicable)

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

**9** Principal occupation / Job title (See Instructions)

**10** Employer (See Instructions)

Date

12/29/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Buie, Susan

Contributor address; City; State; Zip Code  
7905 Goldenrod Cove  
Austin, TX 78750

Amount of  
contribution (\$)

\$25.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/31/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Burnett, Claudia

Contributor address; City; State; Zip Code  
1601 Forest Trail  
Austin, TX 78703

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
\*Teacher

Employer (See Instructions)  
Trinity Episcopal School

Date

12/31/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Burnett, Michael

Contributor address; City; State; Zip Code  
1601 Forest Trail  
Austin, TX 78703

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
\*Attorney

Employer (See Instructions)  
Armbrust & Brown

Date

12/31/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Byars, Anne

Contributor address; City; State; Zip Code  
2103 Schulle Avenue  
Austin, TX 78703

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
\*None

Employer (See Instructions)  
None



# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

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

1 PAGE #  
Schedule: 7/27 Report: 9/32

2 FILER NAME Spelman, William (Dr.)

3 ACCOUNT # (Ethics Commission filers)  
00000005

4 Date

12/31/2011

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Byars, Sam

6 Contributor address; City; State; Zip Code  
2103 Schulle Avenue  
Austin, TX 78703

7 Amount of  
contribution (\$)

\$350.00

8 In-kind contribution  
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)  
\*Attorney

10 Employer (See Instructions)  
Armbrust & Brown

Date

12/29/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Cartwright, Janice

Contributor address; City; State; Zip Code  
1404 Dwyce Drive  
Austin, TX 78757

Amount of  
contribution (\$)

\$25.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/13/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
CDM Political Action Committee

Contributor address; City; State; Zip Code  
3050 Post Oak Boulevard  
Suite 300  
Houston, TX 77056

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/01/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Chimenti, Danette

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

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Consultant

Employer (See Instructions)  
Self

Date

12/08/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Clark, Antoinette

Contributor address; City; State; Zip Code  
2200 Far Gallant 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)  
None

Employer (See Instructions)  
None

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

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

1 PAGE #

Schedule: 8/27 Report: 10/32

2 FILER NAME Spelman, William (Dr.)

3 ACCOUNT # (Ethics Commission filers)  
00000005

4 Date

12/07/2011

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Clark, Joan

6 Contributor address; City; State; Zip Code  
4210 River Garden Trail  
Austin, TX 78746

7 Amount of  
contribution (\$)

\$350.00

8 In-kind contribution  
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)  
None

10 Employer (See Instructions)  
None

Date

12/08/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Clark, Stephen

Contributor address; City; State; Zip Code  
4210 River Garden Trail  
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)  
Chairman

Employer (See Instructions)  
Cypress Real Estate Advisors

Date

12/08/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Clark, Timothy

Contributor address; City; State; Zip Code  
2200 Far Gallant 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)  
Partner

Employer (See Instructions)  
Cypress Real Estate Advisors

Date

12/31/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Collins, Patrick

Contributor address; City; State; Zip Code  
1400 Yaupon Valley Road  
Austin, TX 78746

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
\*Retired

Employer (See Instructions)  
None

Date

12/31/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Collins, Sharlene

Contributor address; City; State; Zip Code  
1400 Yaupon Valley Road  
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)  
\*Attorney

Employer (See Instructions)  
Armbrust & Brown

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

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

**1** PAGE #

Schedule: 9/27 Report: 11/32

**2** FILER NAME Spelman, William (Dr.)

**3** ACCOUNT # (Ethics Commission filers)  
00000005

**4** Date

12/20/2011

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Dailey, Robert

**6** Contributor address; City; State; Zip Code  
P.O. Box 200068  
Austin, TX 78720

**7** Amount of  
contribution (\$)

\$50.00

**8** In-kind contribution  
description (if applicable)

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

**9** Principal occupation / Job title (See Instructions)

**10** Employer (See Instructions)

Date

12/31/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Davis, Ian

Contributor address; City; State; Zip Code  
600 Bouldin Avenue  
Austin, TX 78704

Amount of  
contribution (\$)

\$25.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/30/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Dealey, Amanda

Contributor address; City; State; Zip Code  
5401 Ridge Oak Drive  
Austin, TX 78731

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Investor

Employer (See Instructions)  
Self

Date

12/16/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Dobbs, David

Contributor address; City; State; Zip Code  
9702 Swansons Ranch Road  
Austin, TX 78748

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/31/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Eckert, Karen

Contributor address; City; State; Zip Code  
100 Congress Avenue  
Suite 1300  
Austin, TX 78701

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
\*Lab Technician

Employer (See Instructions)  
University of Texas

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 10/27 Report: 12/32

2 FILER NAME Spelman, William (Dr.)

3 ACCOUNT # (Ethics Commission filers)  
00000005

4 Date

11/23/2011

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Elliott, Chris

6 Contributor address; City; State; Zip Code  
1705 Rabb Road  
Austin, TX 78704

7 Amount of  
contribution (\$)

\$150.00

8 In-kind contribution  
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

12/21/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Fairbrother, Paul

Contributor address; City; State; Zip Code  
4105 Farhills Drive  
Austin, TX 78731

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Consultant

Employer (See Instructions)  
Government Partners LLC

Date

12/05/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Falkenberg, Howard

Contributor address; City; State; Zip Code  
P.O. Box 123  
Austin, TX 78767

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)  
President

Employer (See Instructions)  
Staats Falkenberg

Date

12/01/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Ferchill, Cary

Contributor address; City; State; Zip Code  
301 Congress Avenue  
Suite 1050  
Austin, TX 78701

Amount of  
contribution (\$)

\$200.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Reed & Scardino, LLP

Date

12/26/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Fisher, Francis

Contributor address; City; State; Zip Code  
3208 Harris Park Avenue  
Austin, TX 78705

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 11/27 Report: 13/32

2 FILER NAME Spelman, William (Dr.)

3 ACCOUNT # (Ethics Commission filers)  
00000005

4 Date

12/22/2011

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Frede, Martha

6 Contributor address; City; State; Zip Code  
1000 Liberty Park Drive  
Apt. 106  
Austin, TX 78746

7 Amount of  
contribution (\$)

\$100.00

8 In-kind contribution  
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

12/15/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
George, R. James

Contributor address; City; State; Zip Code  
P.O. Box 685193  
Austin, TX 78768

Amount of  
contribution (\$)

\$300.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Self

Date

12/13/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Getter, Becky

Contributor address; City; State; Zip Code  
1101 East 11th Street  
Austin, TX 78702

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Controller

Employer (See Instructions)  
Balcones Resources

Date

12/13/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Getter, Kerry

Contributor address; City; State; Zip Code  
1101 East 11th Street  
Austin, TX 78702

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
CEO

Employer (See Instructions)  
Balcones Resources

Date

12/30/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Glasco, Alice

Contributor address; City; State; Zip Code  
5117 Valburn Court  
Austin, TX 78731

Amount of  
contribution (\$)

\$25.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #

Schedule: 12/27 Report: 14/32

**2** FILER NAME Spelman, William (Dr.)

**3** ACCOUNT # (Ethics Commission filers)  
00000005

**4** Date

12/22/2011

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Graham, Lawrence

**6** Contributor address; City; State; Zip Code  
5909 Bull Creek Road  
Austin, TX 78757

**7** Amount of  
contribution (\$)

\$150.00

**8** In-kind contribution  
description (if applicable)

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

**9** Principal occupation / Job title (See Instructions)

**10** Employer (See Instructions)

Date

12/21/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Griffith, Beverly

Contributor address; City; State; Zip Code  
3711 Taylors Drive  
Austin, TX 78703

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)  
Property Manager

Employer (See Instructions)  
Griffith Properties and Investments

Date

12/19/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Harris, Jerry

Contributor address; City; State; Zip Code  
111 Congress Avenue  
Suite 1400  
Austin, TX 78701

Amount of  
contribution (\$)

\$25.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/19/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Harris, Sharon

Contributor address; City; State; Zip Code  
111 Congress Avenue  
Suite 1400  
Austin, TX 78701

Amount of  
contribution (\$)

\$25.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/22/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Hartman, Greg

Contributor address; City; State; Zip Code  
3307 Winding Creek Drive  
Austin, TX 78735

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)  
CEO

Employer (See Instructions)  
Seton Brackenridge

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 13/27 Report: 15/32

2 FILER NAME Spelman, William (Dr.)

3 ACCOUNT # (Ethics Commission filers)  
00000005

4 Date

12/31/2011

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Hawkins, Kelley6 Contributor address; City; State; Zip Code  
5805 Carry Back Lane  
Austin, TX 787467 Amount of  
contribution (\$)

\$350.00

8 In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐9 Principal occupation / Job title (See Instructions)  
\*None10 Employer (See Instructions)  
None

Date

12/31/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Hawkins, MarkContributor address; City; State; Zip Code  
5805 Carry Back Lane  
Austin, TX 78746Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
\*AttorneyEmployer (See Instructions)  
Armbrust & Brown

Date

12/05/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Hawthorne, MelissaContributor address; City; State; Zip Code  
1403 Foxwood Cove  
Austin, TX 78704Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
ConsultantEmployer (See Instructions)  
Austin Permit Service, Inc.

Date

12/18/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Heidrick, ClarkeContributor address; City; State; Zip Code  
3702 Eastledge Drive  
Austin, TX 78731Amount of  
contribution (\$)

\$100.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/21/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Hersh, StuartContributor address; City; State; Zip Code  
1307 Kinney Avenue  
#117  
Austin, TX 78704Amount of  
contribution (\$)

\$50.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 14/27 Report: 16/32

2 FILER NAME Spelman, William (Dr.)

3 ACCOUNT # (Ethics Commission filers)  
00000005

4 Date

12/21/2011

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Hill, Forest

6 Contributor address; City; State; Zip Code  
4100 Jackson Avenue  
Apt. 311  
Austin, TX 78731

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)

10 Employer (See Instructions)

Date

12/31/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Hobbs, Jeff

Contributor address; City; State; Zip Code  
3700 Hillbrook Drive  
Austin, TX 78731

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
\*Attorney

Employer (See Instructions)  
Armbrust & Brown

Date

12/31/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Hobbs, Lisa

Contributor address; City; State; Zip Code  
3700 Hillbrook Drive  
Austin, TX 78731

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
\*Attorney

Employer (See Instructions)  
Vinson & Elkins

Date

12/31/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Hollingsworth, Desiree

Contributor address; City; State; Zip Code  
504 Furlong 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)  
\*Retail Jeweler

Employer (See Instructions)  
Self

Date

12/31/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Hollingsworth, Wayne

Contributor address; City; State; Zip Code  
504 Furlong 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)  
\*Attorney

Employer (See Instructions)  
Armbrust & Brown



# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #

Schedule: 15/27 Report: 17/32

**2** FILER NAME Spelman, William (Dr.)

**3** ACCOUNT # (Ethics Commission filers)

00000005

**4** Date

12/24/2011

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Inman, Bobby

**6** Contributor address; City; State; Zip Code  
3200 Riva Ridge Road  
Austin, TX 78746

**7** Amount of  
contribution (\$)

\$350.00

**8** In-kind contribution  
description (if applicable)

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

**9** Principal occupation / Job title (See Instructions)  
Investor

**10** Employer (See Instructions)  
Self

Date

12/15/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Johnson, James

Contributor address; City; State; Zip Code  
400 Pine Siskin  
Buda, TX 78610

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)  
Owner

Employer (See Instructions)  
Gardner Metals and Recycling

Date

12/15/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Johnson, Sherry

Contributor address; City; State; Zip Code  
400 Pine Siskin  
Buda, TX 78610

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)  
Vice President

Employer (See Instructions)  
Gardner Metals and Recycling

Date

12/31/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Jones, Annette

Contributor address; City; State; Zip Code  
305 Riley Road  
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)  
\*None

Employer (See Instructions)  
None

Date

12/31/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Jones, Ken

Contributor address; City; State; Zip Code  
305 Riley Road  
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)  
\*Attorney

Employer (See Instructions)  
Armbrust & Brown

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #

Schedule: 16/27 Report: 18/32

**2** FILER NAME Spelman, William (Dr.)

**3** ACCOUNT # (Ethics Commission filers)  
00000005

**4** Date

12/05/2011

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
King, Robert

**6** Contributor address; City; State; Zip Code  
4212 Park Hollow Court  
Austin, TX 78746

**7** Amount of  
contribution (\$)

\$350.00

**8** In-kind contribution  
description (if applicable)

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

**9** Principal occupation / Job title (See Instructions)  
President

**10** Employer (See Instructions)  
Good Company Associates

Date

12/19/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Klingler, Etta

Contributor address; City; State; Zip Code  
5904 Mountinclimb Drive  
Apartment 1  
Austin, TX 78731

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
None

Employer (See Instructions)  
None

Date

12/31/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Krumme, Greg

Contributor address; City; State; Zip Code  
10702 Hastings Lane  
Austin, TX 78750

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
\*Attorney

Employer (See Instructions)  
Armbrust & Brown

Date

12/31/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Krumme, Robin

Contributor address; City; State; Zip Code  
10702 Hastings Lane  
Austin, TX 78750

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
\*None

Employer (See Instructions)  
None

Date

12/30/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Limbacher, Laurie

Contributor address; City; State; Zip Code  
614 West 31 1/2 Street  
Austin, TX 78705

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Architect

Employer (See Instructions)  
Limbacher & Godfrey

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #

Schedule: 17/27 Report: 19/32

**2** FILER NAME Spelman, William (Dr.)

**3** ACCOUNT # (Ethics Commission filers)

00000005

**4** Date

12/31/2011

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Littlefield, Sue

**6** Contributor address; City; State; Zip Code  
204 Westhaven Drive  
Austin, TX 78746

**7** Amount of  
contribution (\$)

\$350.00

**8** In-kind contribution  
description (if applicable)

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

**9** Principal occupation / Job title (See Instructions)  
\*Attorney

**10** Employer (See Instructions)  
Armbrust & Brown

Date

12/22/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Lorenz, Perry

Contributor address; City; State; Zip Code  
1311-A East 6th Street  
Austin, TX 78702

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Real Estate

Employer (See Instructions)  
Self

Date

12/22/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Lorenz, Sheridan

Contributor address; City; State; Zip Code  
1311-A East 6th Street  
Austin, TX 78702

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Director

Employer (See Instructions)  
Texas Coppersmith, Inc.

Date

12/29/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Lowerre, Richard

Contributor address; City; State; Zip Code  
725 Patterson Avenue  
Austin, TX 78703

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Lowerre Frederick Perales Allmon & Rockwell

Date

12/16/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Lynk, Steven

Contributor address; City; State; Zip Code  
6004 Ronchamps Drive  
Round Rock, TX 78681

Amount of  
contribution (\$)

\$250.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Associate

Employer (See Instructions)  
CDM

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 18/27 Report: 20/32

2 FILER NAME Spelman, William (Dr.)

3 ACCOUNT # (Ethics Commission filers)  
00000005

4 Date

11/30/2011

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Maier, Richard

6 Contributor address; City; State; Zip Code  
704 East 45 1/2 Street  
Austin, TX 78751

7 Amount of  
contribution (\$)

\$350.00

8 In-kind contribution  
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)  
Vice President

10 Employer (See Instructions)  
D.R. Horton

Date

12/22/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Mangan, Andrew

Contributor address; City; State; Zip Code  
1906 Apricot Glen Drive  
Austin, TX 78746

Amount of  
contribution (\$)

\$50.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/21/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Martin, Don

Contributor address; City; State; Zip Code  
1221 South Mopac Expressway  
Suite 115  
Austin, TX 78746

Amount of  
contribution (\$)

\$25.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/21/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Martin, Ronna

Contributor address; City; State; Zip Code  
1221 South Mopac Expressway  
Suite 115  
Austin, TX 78746

Amount of  
contribution (\$)

\$25.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/08/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
McCann, Jana

Contributor address; City; State; Zip Code  
515 Congress Avenue  
Suite 1600  
Austin, TX 78701

Amount of  
contribution (\$)

\$150.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 19/27 Report: 21/32

2 FILER NAME Spelman, William (Dr.)

3 ACCOUNT # (Ethics Commission filers)

00000005

4 Date

12/21/2011

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
McGhee, Fred

6 Contributor address; City; State; Zip Code  
2316 Thrasher Lane  
Austin, TX 78741

7 Amount of  
contribution (\$)

\$50.00

8 In-kind contribution  
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

12/30/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Meade, Nikelle

Contributor address; City; State; Zip Code  
5363 Austral Loop  
Austin, TX 78739

Amount of  
contribution (\$)

\$25.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/21/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Medlin, Cynthia

Contributor address; City; State; Zip Code  
P.O. Box 40964  
Austin, TX 78704

Amount of  
contribution (\$)

\$50.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/27/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Menicucci, Margaret

Contributor address; City; State; Zip Code  
4600 Laurel Canyon Drive  
Austin, TX 78731

Amount of  
contribution (\$)

\$25.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/28/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Moriarty, William

Contributor address; City; State; Zip Code  
400 North Lowell Lane  
Austin, TX 78733

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Principal

Employer (See Instructions)  
Moriarty & Associates

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 20/27 Report: 22/32

**2** FILER NAME Spelman, William (Dr.)

**3** ACCOUNT # (Ethics Commission filers)  
00000005

**4** Date

12/21/2011

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Nias, Jim

**6** Contributor address; City; State; Zip Code  
1116 Reagan Terrace  
Austin, TX 78704

**7** Amount of  
contribution (\$)

\$350.00

**8** In-kind contribution  
description (if applicable)

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

**9** Principal occupation / Job title (See Instructions)  
Partner

**10** Employer (See Instructions)  
Jackson Walker LLP

Date

12/25/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
PANTEX Political Action Committee

Contributor address; City; State; Zip Code  
111 Congress Avenue  
Suite 1400  
Austin, TX 78701

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/15/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Purcell, Fred

Contributor address; City; State; Zip Code  
12912 Park Drive  
Austin, TX 78732

Amount of  
contribution (\$)

\$300.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Partner

Employer (See Instructions)  
Walsh Tarlton, LTD.

Date

12/21/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Reeves, Beverly

Contributor address; City; State; Zip Code  
5403 Tortuga Trail  
Austin, TX 78731

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/15/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Reis, Brian

Contributor address; City; State; Zip Code  
6516 Rotan Drive  
Austin, TX 78749

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)  
Vice President

Employer (See Instructions)  
Espey Consultants

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

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

**1** PAGE #

Schedule: 21/27 Report: 23/32

**2** FILER NAME Spelman, William (Dr.)

**3** ACCOUNT # (Ethics Commission filers)  
00000005

**4** Date

12/15/2011

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Reis, Valerie

**6** Contributor address; City; State; Zip Code  
6516 Rotan Drive  
Austin, TX 78749

**7** Amount of  
contribution (\$)

\$350.00

**8** In-kind contribution  
description (if applicable)

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

**9** Principal occupation / Job title (See Instructions)  
CFO

**10** Employer (See Instructions)  
Espey Consultants

Date

12/21/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Ross, Lauren

Contributor address; City; State; Zip Code  
1405 Hillmont Street  
Austin, TX 78704

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Engineer

Employer (See Instructions)  
Glenrose Engineering

Date

12/28/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Roth, Daniel

Contributor address; City; State; Zip Code  
1503 Wildcat Hollow  
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)  
Commercial Real Estate

Employer (See Instructions)  
Southwest Strategies Group

Date

12/31/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Scrafford, Bruce

Contributor address; City; State; Zip Code  
105 Brooks Hollow Road  
Lakeway, TX 78734

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
\*Attorney

Employer (See Instructions)  
Armbrust & Brown

Date

12/31/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Scrafford, Nora

Contributor address; City; State; Zip Code  
105 Brooks Hollow Road  
Lakeway, TX 78734

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
\*None

Employer (See Instructions)  
None

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 22/27 Report: 24/32

**2** FILER NAME Spelman, William (Dr.)

**3** ACCOUNT # (Ethics Commission filers)  
00000005

**4** Date

12/12/2011

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Shapiro, Jim

**6** Contributor address; City; State; Zip Code  
108 Woodview Court  
Austin, TX 78746

**7** Amount of  
contribution (\$)

\$350.00

**8** In-kind contribution  
description (if applicable)

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

**9** Principal occupation / Job title (See Instructions)  
Secretary

**10** Employer (See Instructions)  
Austin Metal and Iron

Date

12/14/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Shapiro, Morris

Contributor address; City; State; Zip Code  
5104 Oak Ridge Drive  
Austin, TX 78731

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Owner

Employer (See Instructions)  
Shapiro Investments

Date

12/12/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Shapiro, Robert

Contributor address; City; State; Zip Code  
42 Sundown Parkway  
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)  
President

Employer (See Instructions)  
Austin Metal and Iron

Date

12/01/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Siff, Ted

Contributor address; City; State; Zip Code  
604 West 11th Street  
Austin, TX 78701

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/31/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Smith, David

Contributor address; City; State; Zip Code  
100 Congress Avenue  
Suite 1300  
Austin, TX 78701

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
\*Attorney

Employer (See Instructions)  
Armbrust & Brown



# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #

Schedule: 23/27 Report: 25/32

**2** FILER NAME Spelman, William (Dr.)

**3** ACCOUNT # (Ethics Commission filers)  
00000005

**4** Date

12/26/2011

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Speck, Lawrence

**6** Contributor address; City; State; Zip Code  
800 West 5th Street  
Apt. 1102  
Austin, TX 78703

**7** Amount of  
contribution (\$)

\$350.00

**8** In-kind contribution  
description (if applicable)

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

**9** Principal occupation / Job title (See Instructions)  
Architect

**10** Employer (See Instructions)  
PageSouthernlandPage

Date

12/12/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Stacy, Melinda

Contributor address; City; State; Zip Code  
823 Congress Avenue  
Suite 1111  
Austin, TX 78701

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Office Manager

Employer (See Instructions)  
T. Stacy & Associates

Date

12/12/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Stacy, Tom

Contributor address; City; State; Zip Code  
823 Congress Avenue  
Suite 1111  
Austin, TX 78701

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Owner

Employer (See Instructions)  
T. Stacy & Associates

Date

12/31/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Suttle, Alison

Contributor address; City; State; Zip Code  
2900 Greenlee Drive  
Austin, TX 78703

Amount of  
contribution (\$)

\$25.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/31/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Suttle, Richard

Contributor address; City; State; Zip Code  
2900 Greenlee Drive  
Austin, TX 78703

Amount of  
contribution (\$)

\$25.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #  
Schedule: 24/27 Report: 26/32

2 FILER NAME Spelman, William (Dr.)

3 ACCOUNT # (Ethics Commission filers)  
00000005

4 Date

12/31/2011

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Taylor, Kim

6 Contributor address; City; State; Zip Code  
10919 Enchanted Rock Cove  
Austin, TX 78726

7 Amount of  
contribution (\$)

\$350.00

8 In-kind contribution  
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)  
\*None

10 Employer (See Instructions)  
None

Date

12/31/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Taylor, Scott

Contributor address; City; State; Zip Code  
10919 Enchanted Rock Cove  
Austin, TX 78726

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
\*Attorney

Employer (See Instructions)  
Armbrust & Brown

Date

12/21/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Warneke, Bob

Contributor address; City; State; Zip Code  
P.O. Box 2388  
Austin, TX 78768

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/23/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Warren, Gary

Contributor address; City; State; Zip Code  
8520 Dunsmere Drive  
Austin, TX 78749

Amount of  
contribution (\$)

\$50.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/23/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Warren, Milissa

Contributor address; City; State; Zip Code  
8520 Dunsmere Drive  
Austin, TX 78749

Amount of  
contribution (\$)

\$50.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 25/27 Report: 27/32

2 FILER NAME Spelman, William (Dr.)

3 ACCOUNT # (Ethics Commission filers)  
00000005

4 Date

12/01/2011

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Warshaw, Larry

6 Contributor address; City; State; Zip Code  
1000 East 8th Street  
Austin, TX 78702

7 Amount of  
contribution (\$)

\$350.00

8 In-kind contribution  
description (if applicable)

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

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

10 Employer (See Instructions)  
Self

Date

12/01/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Warshaw, Paige

Contributor address; City; State; Zip Code  
1000 East 8th Street  
Austin, TX 78702

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Event Services

Employer (See Instructions)  
Self

Date

12/31/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Whatley, John

Contributor address; City; State; Zip Code  
907 East 37th Street  
Austin, TX 78705

Amount of  
contribution (\$)

\$30.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/21/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Wheeler, Richard

Contributor address; City; State; Zip Code  
1903A Crested Butte 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)  
Retired

Employer (See Instructions)  
None

Date

11/27/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Whellan, Michael

Contributor address; City; State; Zip Code  
4600 Laurel Canyon Drive  
Austin, TX 78731

Amount of  
contribution (\$)

\$25.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 26/27 Report: 28/32

2 FILER NAME Spelman, William (Dr.)

3 ACCOUNT # (Ethics Commission filers)  
00000005

4 Date

11/21/2011

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Wick, Jim

6 Contributor address; City; State; Zip Code  
2611 Eklom Drive  
Unit D  
Austin, TX 78745

7 Amount of  
contribution (\$)

\$5.00

8 In-kind contribution  
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

12/16/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Wiginton, Jeannie

Contributor address; City; State; Zip Code  
908 East Live Oak Street  
Austin, TX 78704

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Client Services Manager

Employer (See Instructions)  
CDM

Date

12/24/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Winstead, Pete

Contributor address; City; State; Zip Code  
79 Pascal Lane  
Austin, TX 78746

Amount of  
contribution (\$)

\$25.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/24/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Winstead, Tomi

Contributor address; City; State; Zip Code  
79 Pascal Lane  
Austin, TX 78746

Amount of  
contribution (\$)

\$25.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/13/2011

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Woelke, Allen

Contributor address; City; State; Zip Code  
4101 Galacia Drive  
Austin, TX 78759

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)  
Vice President

Employer (See Instructions)  
CDM

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #

Schedule: 27/27 Report: 29/32

**2** FILER NAME Spelman, William (Dr.)**3** ACCOUNT # (Ethics Commission filers)  
00000005**4** Date

12/31/2011

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Yiankes, Deno**6** Contributor address; City; State; Zip Code  
2904 Windsor Trail  
Valparaiso, IN 46385**7** Amount of  
contribution (\$)

\$250.00

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

**LOANS****SCHEDULE E**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #

Schedule: 1/1 Report: 30/32

**2** FILER NAME Spelman, William (Dr.)**3** ACCOUNT # (Ethics Commission filers)

00000005

**4**

TOTAL OF UNITEMIZED LOANS:

⇔⇔⇔⇔⇔⇔

\$

**5** Date of loan

11/19/2011

**7** Name of lender

Spelman, William

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

\$500.00

**6** Is lender a  
financial institution?

No

**8** Lender address; City; State; Zip Code3802 Avenue F  
Austin, TX 78751**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☒ not applicable**17** Name of guarantor**18** Guarantor address; City; State; Zip Code**19** Amount Guaranteed (\$)**20** Principal Occupation**21** Employer

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

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 1/2 Report; 31/32		<b>2 FILER NAME</b> Spelman, William (Dr.)		<b>3 ACCOUNT # (TEC filers)</b> 00000005	
<b>4 Date</b> 12/20/2011		<b>5 Payee name</b> Badgley, Shawn			
<b>6 Amount (\$)</b> \$2,000.00		<b>7 Payee address</b> City: State: Zip Code 1005 Edgecliff Terrace Austin, TX 78704			
<b>8 PURPOSE OF EXPENDITURE</b>		<b>(a) Category (See Categories listed at the top of this schedule)</b> Consulting Expense		<b>(b) Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Political and Fundraising Consulting	
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought:	Office held:
<b>Date</b> 12/15/2011		<b>Payee name</b> CheckMark Typesetting			
<b>Amount (\$)</b> \$692.80		<b>Payee address</b> City: State: Zip Code 3217 North IH-35 Austin, TX 78722			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category (See Categories listed at the top of this schedule)</b> Printing Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Lapel and Bumper Stickers	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought:	Office held:
<b>Date</b> 11/30/2011		<b>Payee name</b> NAACP			
<b>Amount (\$)</b> \$75.00		<b>Payee address</b> City: State: Zip Code 1704 East 12th Street Austin, TX 78702			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category (See Categories listed at the top of this schedule)</b> Contributions/Donations Made By Candidate/Officeholder/Political Committee		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Event Sponsorship	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought:	Office held:
<b>Date</b> 12/11/2011		<b>Payee name</b> Opinion Analysts			
<b>Amount (\$)</b> \$500.00		<b>Payee address</b> City: State: Zip Code 906 Rio Grande Street Austin, TX 78701			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category (See Categories listed at the top of this schedule)</b> Polling Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Poll	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		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.

<b>1 PAGE #</b> Schedule: 2/2 Report: 32/32		<b>2 FILER NAME</b> Spelman, William (Dr.)		<b>3 ACCOUNT # (TEC filers)</b> 00000005	
<b>4 Date</b> 12/31/2011	<b>5 Payee name</b> PayPal				
<b>6 Amount (\$)</b> \$306.96	<b>7 Payee address</b> City: State: Zip Code 1840 Embarcadero Road Palo Alto, CA 94303				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Cumulative transaction fees for online fundraising for entire period		
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 12/17/2011	<b>Payee name</b> United States Postal Service				
<b>Amount (\$)</b> \$792.00	<b>Payee address</b> City: State: Zip Code 510 Guadalupe Street Austin, TX 78701				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 12/21/2011	<b>Payee name</b> Vertical Response, Inc.				
<b>Amount (\$)</b> \$72.00	<b>Payee address</b> City: State: Zip Code 501 2nd Street Suite 700 San Francisco, CA 94107				
<b>PURPOSE OF EXPENDITURE</b>	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"/> Email Service		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 12/20/2011	<b>Payee name</b> Wick, Jim				
<b>Amount (\$)</b> \$2,000.00	<b>Payee address</b> City: State: Zip Code 2611 Ektom Drive Unit D Austin, TX 78745				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political and Fundraising Consulting		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:



**PERSONS SOLICITING CONTRIBUTIONS ON YOUR BEHALF**

Name of Candidate/Officeholder: WILLIAM SPELMAN

Enter the name and address of any person who has solicited and obtained contributions on your behalf during the reporting period of \$200 per person from five or more individuals. (This requirement does not apply to an individual who raises funds in total amount of \$5,000 or less for a candidate through a fundraising event held at the individual's residence.)

Name of person soliciting contributions	Address
DAVID ARMBRUST*	2807 REGENTS PARK, AUSTIN, TEXAS 78746

Reminder: This form is to identify bundlers, i.e. individuals who solicit and obtain contributions on your behalf. However, please remember there is a separate form to identify the *actual* donors (C/OH).

ALL CONTRIBUTIONS SHOWN ON C/OH FROM "BUNDLERS" ARE MARKED WITH ASTERISKS AS SHOWN ABOVE IN THEIR RESPECTIVE EMPLOYER/OCCUPATION INFORMATION.

### ANNUAL RECONCILIATION

(To be filed by candidate, officeholder or campaign committee with the January 15<sup>th</sup>  
contribution and expenditure report)

Name of candidate, officeholder or campaign committee: WILLIAM SPELMAN

For each checking, savings or other financial institution account maintained during 20 11, enter  
the following information indicated. For each additional institution, use a copy of this schedule.

The name of the financial institution: UNIVERSITY FEDERAL CREDIT UNION

Type of account: FREE CHECKING

The beginning balance: \$0.00

The ending balance: \$13,510.19

Enter the following information for checks issued on that account that have not cleared by  
December 31:

Date	Payee	Amount
N/A		

Enter the following information for checks received as contributions and deposited but dishonored  
by the contributor's financial institution:

Date of receipt	Contributor	Amount
N/A		

Amount of interest or dividends earned: \_\_\_\_\_

SCHEDULE W - attach to form C/OH (C&E)  
Reference 2-2-25, Austin City Code

All deposits and withdrawals not disclosed on a filed contribution and expenditure report:

Date of deposit or withdrawal	Amount of deposit	Amount of withdrawal
11/23/2011	\$ .10	
11/23/2011	\$ .04	
12/06/2011		\$1.95

A listing of checks received that have not been deposited into any account by December 31:

Date of receipt	Contributor	Amount

12/31/2011 JOSHUA AND ERIN BERNSTEIN \$700  
12/31/2011 FRANK AND JANICE BROWN \$700  
12/31/2011 BRUCE AND NORA SCRAFFORD \$700  
12/31/2011 SCOTT AND KIM TAYLOR \$700  
12/31/2011 WAYNE AND DESIREE HOLLINGSWORTH \$700  
12/31/2011 MICHAEL AND CLAUDIA BURNETT \$700  
12/31/2011 MARK AND KELLEY HAWKINS \$700  
12/31/2011 JOHN AND ASHLEY BARTRAM \$700  
12/31/2011 GREGG AND ROBIN KRUMME \$700  
12/31/2011 DAVID SMITH AND KAREN ECKERT \$700  
12/31/2011 KEN AND ANNETTE JONES \$700  
12/31/2011 BRIAN AND KIMBERLY BECKHAM \$700  
12/31/2011 SUE LITTLEFIELD \$350  
12/31/2011 SHARLENE AND PATRICK COLLINS \$700  
12/31/2011 JEFF AND LISA HOBBS \$700  
12/31/2011 SAM AND ANNE BYARS \$700  
12/31/2011 DENO YIANKES \$250  
12/31/2011 RICHARD AND ALISON SUTTLE \$50  
12/31/2011 DAVID AND CHERYL ARMBRUST \$50

THE FOLLOWING CONTRIBUTIONS WERE MADE ONLINE BUT NOT DEPOSITED BY 12/31/2011:

12/28/2011 DAVID ANDERSON \$350  
12/28/2011 TOM AUSLEY \$100  
12/29/2011 JANICE CARTWRIGHT \$25  
12/29/2011 JED AND SUSAN BUIE \$50  
12/29/2011 RICHARD LOWERRE \$350  
12/30/2011 NIKELLE MEADE \$25  
12/30/2011 AMANDA DEALEY \$350  
12/30/2011 LAURIE LIMBACHER \$350  
12/31/2011 JOHN WHATLEY \$30  
12/31/2011 IAN DAVIS \$25

**ANNUAL RECONCILIATION OF CAMPAIGN DEBT**

(To be filed by officeholders only during an election year)

Period Covered: January 1, 20 11 to December 31, 20 11

Name of Officeholder: WILLIAM SPELMAN

Campaign debt\*\* existing as of the first day of the calendar year: \$0.00

Campaign debt\*\* existing as of the last day of the calendar year: \$0.00

Enter the following information on all campaign debt existing as of December 31 of the reporting year:

(a) For loans and other debt evidenced by a note, the name of the creditor, the principal amount owed, the interest rate and the date of maturity. Campaign debts under \$50 may be reported as an aggregate under (c) below:

Creditor	Principal amount owed	Interest rate	Date of maturity

(b) For all other campaign debts, enter the name of the creditor and the principal amount owed. Campaign debts under \$50 may be reported as an aggregate under (c), below:

Creditor	Principal amount owed
WILLIAM SPELMAN	\$500.00

SCHEDULE X – attach to form C/OH (C&E)  
Reference 2-2-42, Austin City Code

(c) Enter the total of campaign debts under \$50 if they are not itemized under (a) or (b) above.

---

\*\* Campaign debt is the actual outstanding obligation of the candidate or candidate's committee as of a particular date, minus all funds held by the candidate or candidate's committee in cash or bank accounts on that date.



# 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) 00121212	2 Total pages filed:  12
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI William NICKNAME LAST SUFFIX Bill Spelman		<b>OFFICE USE ONLY</b> Date Received Date Hand-delivered or Postmarked Receipt # Amount Date Processed Date Imaged <b>AUSTIN CITY CLERK RECEIVED</b> 2012 JAN 17 PM 3 15
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> change of address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 301 W. 2nd St. Austin, TX 78701		
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION ( 512 ) 974.2256		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Ms. Martha NICKNAME LAST SUFFIX Smiley		
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 600 Congress Ave., Ste. 2800 Austin, TX 78701		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION ( 512 ) 615.1207		
9 REPORT TYPE	<input checked="" 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 type="checkbox"/> Final report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year    Month Day Year 07 / 01 / 2011    THROUGH    12 / 31 / 2011		
11 ELECTION	ELECTION DATE    ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special 05 / 09 / 09		
12 OFFICE	OFFICE HELD (if any) Council Member, Place 5	13 OFFICE SOUGHT (if known)	
14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS  <input type="checkbox"/> additional pages	DIRECT CAMPAIGN EXPENDITURES ARE CAMPAIGN EXPENDITURES MADE BY OTHERS WITHOUT THE CANDIDATE'S PRIOR CONSENT OR APPROVAL. CANDIDATES ARE REQUIRED TO DISCLOSE THIS INFORMATION ONLY IF THEY RECEIVE NOTIFICATION OF THE DIRECT CAMPAIGN EXPENDITURE. Name Address / PO Box; Apt. / Suite #; City; State; Zip Code		
GO TO PAGE 2			

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

**15 C/OH NAME** William Spelman **16 ACCOUNT # (Ethics Commission Filers)** 00121212

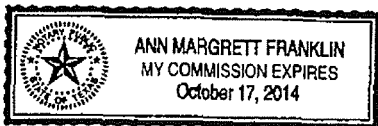
**17 NOTICE FROM POLITICAL COMMITTEE(S)**

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE 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.

<input type="checkbox"/> additional pages	<b>COMMITTEE TYPE</b>  <input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	<b>COMMITTEE NAME</b>  <b>COMMITTEE ADDRESS</b>  <b>COMMITTEE CAMPAIGN TREASURER NAME</b>  <b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>

<b>18 CONTRIBUTION TOTALS</b>	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0
<b>EXPENDITURE TOTALS</b>	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ 309.06
	4. TOTAL POLITICAL EXPENDITURES	\$ 3126.32
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 10927.76
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0

### 19 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.

*William Spelman*  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said William Spelman, this the 17 day of January, 2012, to certify which, witness my hand and seal of office.

*Ann Margaret Franklin* *Ann Margaret Franklin* *Notary*  
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath



**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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.

<b>1</b> Total pages Schedule F: 1/7		<b>2</b> FILER NAME William Spelman		<b>3</b> ACCOUNT # (Ethics Commission Filers) 0121212	
<b>4</b> Date 07/02/11		<b>5</b> Payee name iContact			
<b>6</b> Amount (\$) 7.00		<b>7</b> Payee address; City; State; Zip Code 2635 Meridian Pkwy., Ste. 200 Durham, NC 27713			
<b>8</b> PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Advertising expense-email services		(b) Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 08/01/11		Payee name Umbrella Media			
Amount (\$) 58.47		Payee address; City; State; Zip Code 111 W Anderson Lane, Suite D215 Austin, TX 78752			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Advertising expense-website services		Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 08/02/11		Payee name iContact			
Amount (\$) 7.00		Payee address; City; State; Zip Code 2635 Meridian Pkwy., Ste. 200 Durham, NC 27713			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Advertising expense-email services		Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 08/03/11		Payee name American Federation of Labor and Congress of Industrial Organizations			
Amount (\$) 215.00		Payee address; City; State; Zip Code 1106 Lavaca St. Austin, TX 78701			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Advertising expense-Labor Day Ad		Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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.

<b>1</b> Total pages Schedule F: 2/7	<b>2</b> FILER NAME William Spelman	<b>3</b> ACCOUNT # (Ethics Commission Filers) 00121212
<b>4</b> Date 08/12/11	<b>5</b> Payee name Texas Ethics Commission	
<b>6</b> Amount (\$) 250.00	<b>7</b> Payee address; City; State; Zip Code P. O. Box 12070 Austin, TX 78711-2070	
<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) fees	(b) Description (If travel outside of Texas, complete Schedule T) fines
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/15/11	Payee name Capital Area Democratic Women	
Amount (\$) 100.00	Payee address; City; State; Zip Code P.O. Box 2211 Austin TX 78768	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising expense-Celebration of Champions	Description (If travel outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/15/11	Payee name South Austin Democrats	
Amount (\$) 25.00	Payee address; City; State; Zip Code PO Box 152592 Austin, TX 78715	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising expense-Yeller Dawg Awards	Description (If travel outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/15/11	Payee name Deena Estrada Salinas	
Amount (\$) 287.90	Payee address; City; State; Zip Code 2611 Ektom Drive, Unit D Austin, TX 78745	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) contract labor	Description (If travel outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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 Total pages Schedule F: 3/7  
2 FILER NAME William Spelman  
3 ACCOUNT # (Ethics Commission Filers) 00121212

4 Date 09/02/11  
5 Payee name iContact

6 Amount (\$) 7.00  
7 Payee address; City; State; Zip Code  
2635 Meridian Pkwy., Ste. 200  
Durham, NC 27713

8 PURPOSE OF EXPENDITURE  
(a) Category (See categories listed at the top of this schedule) Advertising expense-email services  
(b) Description (If travel outside of Texas, complete Schedule T)

9 Complete ONLY if direct expenditure to benefit C/OH  
Candidate / Officeholder name Office sought Office held

Date 09/27/11  
Payee name American Airlines

Amount (\$) 420.80  
Payee address; City; State; Zip Code  
P.O. Box 619612 MD 2400  
DFW Airport, TX 75261

PURPOSE OF EXPENDITURE  
Category (See categories listed at the top of this schedule) travel expense-flight to Washington, D.C.  
Description (If travel outside of Texas, complete Schedule T) American Society of Criminology Award Recipient

Complete ONLY if direct expenditure to benefit C/OH  
Candidate / Officeholder name Office sought Office held

Date 09/28/11  
Payee name CVS Pharmacy

Amount (\$) 108.00  
Payee address; City; State; Zip Code  
2101 S. Lamar  
Austin, TX 78704

PURPOSE OF EXPENDITURE  
Category (See categories listed at the top of this schedule) reimbursement for Deena Estrada Salinas  
Description (If travel outside of Texas, complete Schedule T) staff gift

Complete ONLY if direct expenditure to benefit C/OH  
Candidate / Officeholder name Office sought Office held

Date 09/28/11  
Payee name Babies R Us

Amount (\$) 20.00  
Payee address; City; State; Zip Code  
5207 Brodie Ln. Ste 160  
Sunset Valley, TX 78745

PURPOSE OF EXPENDITURE  
Category (See categories listed at the top of this schedule) reimbursement for Deena Estrada Salinas  
Description (If travel outside of Texas, complete Schedule T) staff gift

Complete ONLY if direct expenditure to benefit C/OH  
Candidate / Officeholder name Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F: 4/7	<b>2</b> FILER NAME William Spelman	<b>3</b> ACCOUNT # (Ethics Commission Filers) 00121212
<b>4</b> Date 10/04/11	<b>5</b> Payee name iContact	
<b>6</b> Amount (\$) 7.00	<b>7</b> Payee address; City; State; Zip Code 2635 Meridian Pkwy., Ste. 200 Durham, NC 27713	
<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising expense-email services	(b) Description (If travel outside of Texas, complete Schedule T)
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date 10/16/11	Payee name Umbrella Media	
Amount (\$) 38.98	Payee address; City; State; Zip Code 111 W Anderson Lane, Suite D215 Austin, TX 78752	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising expense-website services	Description (If travel outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date 09/27/11	Payee name Babies R Us	
Amount (\$) 41.23	Payee address; City; State; Zip Code 5207 Brodie Ln. Ste 160 Sunset Valley, TX 78745	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) reimbursement for Barksdale English	Description (If travel outside of Texas, complete Schedule T) staff gift
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date 10/26/11	Payee name Special Olympics	
Amount (\$) 50.00	Payee address; City; State; Zip Code 7715 Chevy Chase Drive, Suite 120 Austin, Texas 78752	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution expense	Description (If travel outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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.

<b>1</b> Total pages Schedule F: 5/7	<b>2</b> FILER NAME William Spelman	<b>3</b> ACCOUNT # (Ethics Commission Filers) 00121212
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<b>4</b> Date 10/26/11	<b>5</b> Payee name Mobile Loaves & Fishes
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<b>6</b> Amount (\$) 100.00	<b>7</b> Payee address; City; State; Zip Code 903 S. Capital of Texas Highway Austin, TX 78746
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<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contribution expense	(b) Description (If travel outside of Texas, complete Schedule T)
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10/26/11	Payee name Liveable City
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Amount (\$) 100.00	Payee address; City; State; Zip Code PO Box 5991 Austin, TX 78763
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising expense-Vision Awards	Description (If travel outside of Texas, complete Schedule T)
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/01/11	Payee name iContact
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Amount (\$) 76.16	Payee address; City; State; Zip Code 2635 Meridian Pkwy., Ste. 200 Durham, NC 27713
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising expense-email services	Description (If travel outside of Texas, complete Schedule T)
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10/24/11	Payee name The Austin Project
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Amount (\$) 150.00	Payee address; City; State; Zip Code 5221 Ledesma Rd. Austin, TX 78721
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution expense-The Rostow Awards	Description (If travel outside of Texas, complete Schedule T)
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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.

<b>1</b> Total pages Schedule F: 6/7	<b>2</b> FILER NAME William Spelman	<b>3</b> ACCOUNT # (Ethics Commission Filers) 00121212
<b>4</b> Date 11/09/11	<b>5</b> Payee name Texas Civil Rights Project	
<b>6</b> Amount (\$) 250.00	<b>7</b> Payee address; City; State; Zip Code 1405 Montopolis Drive Austin, TX 78741-3436	
<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contribution expense-Bill of Rights Dinner	(b) Description (If travel outside of Texas, complete Schedule T)
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/10/11	Payee name Planned Parenthood	
Amount (\$) 500.00	Payee address; City; State; Zip Code 201 East Ben White Blvd., Building B Austin, TX 78704	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution expense	Description (If travel outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/01/11	Payee name Umbrella Media	
Amount (\$) 19.49	Payee address; City; State; Zip Code 111 W Anderson Lane, Suite D215 Austin, TX 78752	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising expense-website services	Description (If travel outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/01/11	Payee name Austin National Association for the Advancement of Colored People (NAACP)	
Amount (\$) 65.00	Payee address; City; State; Zip Code 704 E. 12th Street Austin, Texas 78702	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution expense-46th Annual DeWitty/Overton Freedom Fund Banquet	Description (If travel outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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.

<b>1</b> Total pages Schedule F: 7/7	<b>2</b> FILER NAME William Spelman	<b>3</b> ACCOUNT # (Ethics Commission Filers) 00121212
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<b>4</b> Date 12/02/11	<b>5</b> Payee name iContact
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<b>6</b> Amount (\$) 74.00	<b>7</b> Payee address; City; State; Zip Code 263S Meridian Pkwy., Ste. 200 Durham, NC 27713
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<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising expense-email services	(b) Description (If travel outside of Texas, complete Schedule T)
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12/02/11	Payee name CVS Pharmacy
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Amount (\$) 61.93	Payee address; City; State; Zip Code 2101-B S Lamar Blvd Austin, TX 78704
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other-office supplies	Description (If travel outside of Texas, complete Schedule T)
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12/7/11	Payee name East Austin Conservancy
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Amount (\$) 50.00	Payee address; City; State; Zip Code P.O. Box 6462 Austin, TX 78762
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution-50 Giving 50 Event	Description (If travel outside of Texas, complete Schedule T)
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12/18/11	Payee name Randall's
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Amount (\$) 36.36	Payee address; City; State; Zip Code 1500 W 35th St Austin, TX 78703
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other-office supplies	Description (If travel outside of Texas, complete Schedule T)
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**IN-KIND CONTRIBUTION OR POLITICAL EXPENDITURE  
FOR TRAVEL OUTSIDE OF TEXAS****SCHEDULE T**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule T: 1/1
2 FILER NAME William Spelman		3 ACCOUNT # (Ethics Commission Filers) 00121212
4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee American Airlines		
5 Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule C <input type="checkbox"/> Schedule D <input checked="" type="checkbox"/> Schedule F <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule N <input type="checkbox"/> COH-UC <input type="checkbox"/> COH-T <input type="checkbox"/> PAC-C <input type="checkbox"/> PAC-E		
6 Dates of travel  11/15/11- 11/17/11	7 Name of person(s) traveling William Spelman	
8 Departure city or name of departure location Austin, TX		
9 Destination city or name of destination location Washington, D.C.		
10 Means of transportation airplane	11 Purpose of travel (including name of conference, seminar, or other event) American Society of Criminology Award Recipient	
Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule C <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule N <input type="checkbox"/> COH-UC <input type="checkbox"/> COH-T <input type="checkbox"/> PAC-C <input type="checkbox"/> PAC-E		
Dates of travel	Name of person(s) traveling	
Departure city or name of departure location		
Destination city or name of destination location		
Means of transportation	Purpose of travel (including name of conference, seminar, or other event)	
Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule C <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule N <input type="checkbox"/> COH-UC <input type="checkbox"/> COH-T <input type="checkbox"/> PAC-C <input type="checkbox"/> PAC-E		
Dates of travel	Name of person(s) traveling	
Departure city or name of departure location		
Destination city or name of destination location		
Means of transportation	Purpose of travel (including name of conference, seminar, or other event)	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		



### ANNUAL RECONCILIATION

(To be filed by candidate, officeholder or campaign committee with the January 15<sup>th</sup>  
contribution and expenditure report)

Name of candidate, officeholder or campaign committee: William Spelman

For each checking, savings or other financial institution account maintained during 2011, enter  
the following information indicated. For each additional institution, use a copy of this schedule.

The name of the financial institution: University Federal Credit Union

Type of account: Checking

The beginning balance: \$16,967.23

The ending balance: \$10,725.83

Enter the following information for checks issued on that account that have not cleared by  
December 31:

Date	Payee	Amount
12/19/11	William Spelman	\$211.49

Enter the following information for checks received as contributions and deposited but dishonored  
by the contributor's financial institution:

Date of receipt	Contributor	Amount

Amount of interest or dividends earned: \_\_\_\_\_

SCHEDULE W - attach to form C/OH (C&E)  
Reference 2-2-25, Austin City Code

All deposits and withdrawals not disclosed on a filed contribution and expenditure report:

Date of deposit or withdrawal	Amount of deposit	Amount of withdrawal

A listing of checks received that have not been deposited into any account by December 31:

Date of receipt	Contributor	Amount

2015

**CANDIDATE/OFFICEHOLDER  
CAMPAIGN FINANCE REPORT**

**FORM C/OH  
Cover Sheet PG 1 & 2**

The C/OH Instruction Guide explains how to complete this form.		1. ACCOUNT # (Ethics Commission Filers)		2. Total pages filed: 116	
3 CANDIDATE/ OFFICEHOLDER NAME	MS/MRS/MR	FIRST	MI		OFFICE USE ONLY Date Received
	NICKNAME	LAST	SUFFIX		
4 CANDIDATE/ OFFICEHOLDER ADDRESS	ADDRESS /PO BOX:		APT/SUITE #	CITY	STATE: ZIP CODE
	808 Nueces Street			Austin	TX 78701
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		Receipt #
6 CAMPAIGN TREASURER NAME	MS/MRS/MR	FIRST	MI		essed
	NICKNAME				ed
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS:				CODE
	3114 Wheeler Street				
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHON			
		(512) 970-9400			
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15	<input type="checkbox"/>	day after campaign treasurer		
	<input type="checkbox"/> July 15	<input type="checkbox"/>	appointment (officeholder only)		
10 PERIOD COVERED	Month	Day	Year	THROUGH	Year
		12/07/2014			12/31/2014
11 ELECTION	ELECTION DATE		ELECTION TYPE		
	Month	Day	Year	<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> Runoff
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if known)		
			Other Office: Mayor		

AUSTIN CITY CLERK  
RECEIVED  
2015 JUN 15 PM 4 46

Both  
2-2-25 and  
2-2-42  
were duly  
filed

2015

Texas Ethics Commission

P.O. Box 12070

Austin, Texas 78711-2070

(512) 463-5800

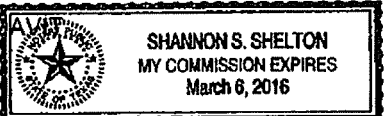
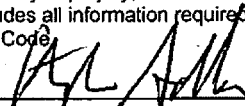
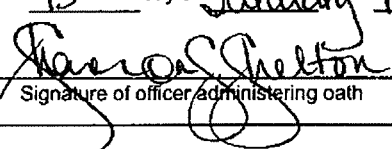
(TDD 1-800-325-8506)

# CANDIDATE/OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH Cover Sheet PG 1 & 2

The C/OH Instruction Guide explains how to complete this form.		1. ACCOUNT # (Ethics Commission Filers)	2. Total pages filed: 118 116 216
3 CANDIDATE/ OFFICEHOLDER NAME	MS/MRS/MR	FIRST	MI
	NICKNAME	LAST	SUFFIX
4 CANDIDATE/ OFFICEHOLDER ADDRESS	ADDRESS /PO BOX: APT/SUITE # CITY STATE: ZIP CODE		OFFICE USE ONLY
<input type="checkbox"/> Change of Address	808 Nueces Street Austin TX 78701		Date Received
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
6 CAMPAIGN TREASURER NAME	MS/MRS/MR	FIRST	MI
	NICKNAME	LAST	SUFFIX
	Eugene Sepulveda		Date Processed
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS: APT/SUITE # CITY STATE: ZIP CODE		Date Imaged
	3114 Wheeler Street Austin TX 78705		
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
		(512) 970-9400	
9 REPORT TYPE	<input checked="" 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 type="checkbox"/> Final report (Attach- COH-FR)		
10 PERIOD COVERED	Month Day Year    Month Day Year 12/07/2014    THROUGH    12/31/2014		
11 ELECTION	ELECTION DATE    ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special 12/16/2014 <input type="checkbox"/> Other		
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if known) Other Office: Mayor

 RECEIVED  
AUSTIN CITY CLERK

<b>14 C/OH NAME</b>	Stephen Adler		<b>15 ACCOUNT #</b> (Ethics Commission Filers)
<b>16 NOTICE FROM POLITICAL COMMITTEE(S)</b>	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE 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.		
	<b>COMMITTEE TYPE</b>  <input type="checkbox"/> GENERAL  <input checked="" type="checkbox"/> SPECIFIC	<b>COMMITTEE NAME</b>  Progress for Austin PAC	
	<b>COMMITTEE ADDRESS</b>  6411 Burleson Rd Austin, TX 78744		
	<b>COMMITTEE CAMPAIGN TREASURER NAME</b>  Marc Winkelman		
	<b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>  6711 Burleson Road Austin, TX 78744		
<input type="checkbox"/> additional pages			
<b>17 CONTRIBUTION TOTALS</b>	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)	\$74,112.00
<b>EXPENDITURE TOTALS</b>	3	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$0.00
	4	TOTAL POLITICAL EXPENDITURES	\$180,384.40
<b>CONTRIBUTION BALANCE</b>	5	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$0.00
<b>OUTSTANDING LOAN TOTALS</b>	6	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$387,238.57
<b>18 AFFIDAVIT</b>	<div style="display: flex; justify-content: space-between;"> <div style="width: 30%;">  </div> <div style="width: 65%;"> <p>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.</p> <p style="text-align: right;">             _____            Signature of Candidate or Officeholder         </p> </div> </div> <p>AFFIX NOTARY STAMP / SEAL ABOVE</p> <p>Sworn to and subscribed before me, by the said <u>Stephen I. Adler</u> this the <u>15th</u> day of <u>January</u> 20<u>15</u> to certify which, witness my hand and seal of office.</p> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 30%;">             _____            Signature of officer administering oath         </div> <div style="width: 30%;"> <u>SHANNON S. SHELTON</u>            _____            Printed name of officer administering oath         </div> <div style="width: 30%;"> <u>NOTARY</u>            _____            Title of officer administering oath         </div> </div>		

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/07/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC William Abell		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 1607 Kerr Ave Austin, TX 78704-1424		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) retail store owner			10 Employer (See Instructions) Bicycle Sport Shop		
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Paige G Alam		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 1401 Gaston Ave Austin, TX 78703-2513		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Author			10 Employer (See Instructions) Graham Blanchard		
4. Date 12/13/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Laurie Allan		7. Amount of contribution \$50.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 1114 S 1st St Austin, TX 78704-2355		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Cheryl Armbrust		7. Amount of contribution \$25.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 2807 Regents Park Regents Park Austin, TX 78746-7619		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		

### ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC David Armbrust		7. Amount of contribution \$25.00	8. In-kind contribution description (if applicable)	
	6. Contributor address: City State ZIP Code 100 Congress Ave Ste 1300 Austin, TX 78701-2744		(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Thomas C. Arndt		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
	6. Contributor address: City State ZIP Code 19907 Kennemer Dr Pflugerville, TX 78660-5063		(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Engineer			10 Employer (See Instructions) Dannenbaum Engineering Corporation		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Jon Aune		7. Amount of contribution \$100.00	8. In-kind contribution description (if applicable)	
	6. Contributor address: City State ZIP Code 374 King Arthur Ct Austin, TX 78746-5043		(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/12/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Alice Bailey		7. Amount of contribution \$50.00	8. In-kind contribution description (if applicable)	
	6. Contributor address: City State ZIP Code 1807 Pearl St Austin, TX 78701-1026		(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/10/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Ken Bailey		7. Amount of contribution \$250.00	8. In-kind contribution description (if applicable)	
	6. Contributor address: City State ZIP Code 4004 Merimac Austin, TX 78731-1307		(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Fire Fighter			10 Employer (See Instructions) Retired		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Justin Bankston		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
	6. Contributor address: City State ZIP Code 3510 Werner Ave Austin, TX 78722-1816		(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Web Developer			10 Employer (See Instructions) SXSU		
4. Date 12/13/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Michelle Bartholomew		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
	6. Contributor address: City State ZIP Code 5716 W Highway 290 Ste 100 Austin, TX 78735-8719		(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Homemaker			10 Employer (See Instructions) None		
4. Date 12/13/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Steve Bartholomew		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
	6. Contributor address: City State ZIP Code 5716 W Highway 290 # 100 Austin, TX 78735-8702		(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Builder			10 Employer (See Instructions) MS 2011 General Contractors, LLC		

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/10/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Jet Bartlett		7. Amount of contribution \$150.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 2508 Greenlee Dr # 1 Austin, TX 78703-1715			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC John Bartram		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 309 McConnell Dr West Lake Hills, TX 78746-4434			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Attorney			10 Employer (See Instructions) Armbrust & Brown, PLLC		
4. Date 12/08/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Paula Beaird		7. Amount of contribution \$25.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 1710 Valeria St Austin, TX 78704			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Kimberly Beckham		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 11205 Limoncillo Ct Austin, TX 78750-3688			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Attorney			10 Employer (See Instructions) Armbrust & Brown, PLLC		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/07/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Christopher Bell		7. Amount of contribution \$100.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 806 W 10th St Ste B Austin, TX 78701-2060			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/07/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Karla Bell		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 3411 Southill Cir Austin, TX 78703-1045			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) None			10 Employer (See Instructions) None		
4. Date 12/08/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Rudy Belton		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 505 E Huntland Dr Ste 530 Austin, TX 78752-3760			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Investment Real Estate			10 Employer (See Instructions) Belco Equities, Inc.		
4. Date 12/08/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Sally Belton		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 112 Birnam Wood Ct Austin, TX 78746-4500			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Real Estate			10 Employer (See Instructions) Belco Equities, Inc.		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

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2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Ashley Rose Bennett		7. Amount of contribution \$110.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 1208 Grosvenor Ct Austin, TX 78746-6856			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Taylor Bennett		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 1208 Grosvenor Ct Austin, TX 78746-6856			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Student			10 Employer (See Instructions) None		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Marc Birbaum		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 4305 W Lovers Ln Dallas, TX 75209-2803			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Real Estate			10 Employer (See Instructions) MAB Investments		
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Heyden Black Walker		7. Amount of contribution \$25.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 6006 Cary Dr Austin, TX 78757-3112			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Joel Blanchard		7. Amount of contribution \$200.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 7108 Teaberry Dr Austin, TX 78745-6435			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Account Manager			10 Employer (See Instructions) Buzz Points		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Scott Blech		7. Amount of contribution \$50.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 3503 Needles Dr Austin, TX 78746-1457			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Marla Bommarito-Crouch		7. Amount of contribution \$350.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 4705 Island Cv Austin, TX 78731-5144			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Interior Design			10 Employer (See Instructions) The Bommarito Group		
4. Date 12/11/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Ave Bonar		7. Amount of contribution \$50.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 2423 Forest Ave Austin, TX 78704-5521			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/10/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Carolyn Bowles		7. Amount of contribution \$300.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 13009 On The Lake Rd Austin, TX 78732-6030			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Realtor			10 Employer (See Instructions) Self		
4. Date 12/11/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Andrew Bowman		7. Amount of contribution \$250.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 212 W 33rd St Austin, TX 78705-2316			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Founder			10 Employer (See Instructions) Pioneer Green Energy		
4. Date 12/08/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Bruce Bramhall		7. Amount of contribution \$50.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 202 Applewood Dr Pflugerville, TX 78660-2804			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Russell B. Bridges		7. Amount of contribution \$200.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 6405 Cascada Dr Austin, TX 78750-8156			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Government Affairs Manager			10 Employer (See Instructions) 3M		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Janice Brown		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 602 Coquina Ln West Lake Hills, TX 78746-4536		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) College Selection Counselor			10 Employer (See Instructions) College Application Processing Service of Austin, Inc.		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC JULIA BROWN		7. Amount of contribution \$40.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 4406 Adelphi Ln Austin, TX 78727-5201		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Sabrina Brown		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 1220 Colorado St Ste 220 Austin, TX 78701-1859		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Government Relations Consultant			10 Employer (See Instructions) Self		
4. Date 12/10/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Bonnie G. Bruce		7. Amount of contribution \$50.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 3211 Bay Hill Ln Round Rock, TX 78664-6135		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/10/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Mark J. Bruce		7. Amount of contribution \$50.00	8. In-kind contribution description (if applicable)	
	6. Contributor address: City State ZIP Code 3211 Bay Hill Ln Round Rock, TX 78664-6135		(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/11/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Cecelia Burke		7. Amount of contribution \$100.00	8. In-kind contribution description (if applicable)	
	6. Contributor address: City State ZIP Code 6500 Santolina Cv Austin, TX 78731-2806		(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Michael Burnett		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
	6. Contributor address: City State ZIP Code 1601 Forest Trl Austin, TX 78703-3231		(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Attorney			10 Employer (See Instructions) Armbrust & Brown, PLLC		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Robert Burton		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
	6. Contributor address: City State ZIP Code 2125 Sea Eagle Vw Austin, TX 78738-5382		(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Attorney			10 Employer (See Instructions) Winstead PC		

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The instruction Guide explains how to complete this form.		1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler		3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC James Bushnell 6. Contributor address: City State ZIP Code 5104 Portmarnock Ct Austin, TX 78747-1466	7. Amount of contribution \$100.00 (if travel outside of Texas, complete Schedule T)	8. In-kind contribution description (if applicable)
9. Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Anne Byars 6. Contributor address: City State ZIP Code 2103 Schulle Ave Austin, TX 78703-2141	7. Amount of contribution \$350.00 (if travel outside of Texas, complete Schedule T)	8. In-kind contribution description (if applicable)
9. Principal occupation / Job title (See Instructions) Farmer		10 Employer (See Instructions) Self-employed	
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Samuel Byars 6. Contributor address: City State ZIP Code 2103 Schulle Ave Austin, TX 78703-2141	7. Amount of contribution \$350.00 (if travel outside of Texas, complete Schedule T)	8. In-kind contribution description (if applicable)
9. Principal occupation / Job title (See Instructions) Attorney		10 Employer (See Instructions) Armbrust & Brown, PLLC	
4. Date 12/10/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Boyce Cabaniss 6. Contributor address: City State ZIP Code 209 E Elizabeth St Austin, TX 78704	7. Amount of contribution \$100.00 (if travel outside of Texas, complete Schedule T)	8. In-kind contribution description (if applicable)
9. Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	

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## **SCHEDULE A**

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2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/10/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Gary Calabrese		7. Amount of contribution \$350.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 7752 El Dorado Dr Austin, TX 78737-3005		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Attorney			10 Employer (See Instructions) Self		
4. Date 12/09/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Andrea Campana		7. Amount of contribution \$100.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 2716 Barton Creek Blvd 2014 Austin, TX 78735-1638		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Patrick Carlson		7. Amount of contribution \$350.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 1609 Mohle Dr Austin, TX 78703-1937		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Attorney			10 Employer (See Instructions) Armbrust & Brown, PLLC		
4. Date 12/07/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC James Casey		7. Amount of contribution \$350.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 10123 Treasure Island Dr Austin, TX 78730		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Retired			10 Employer (See Instructions) Retired		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/08/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Whitney Casey		7. Amount of contribution \$350.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 600 W 7th St Austin, TX 78701-2710			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Spokesperson			10 Employer (See Instructions) Match.com		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Peter Cesaro		7. Amount of contribution \$25.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 54 Rainey St Apt 713 Austin, TX 78701-4393			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC George K. Chang		7. Amount of contribution \$350.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 15224 Interlachen Dr Austin, TX 78717-3867			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Retired			10 Employer (See Instructions) None		
4. Date 12/10/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Emmi Chen		7. Amount of contribution \$200.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 2507 Walter St Austin, TX 78702-2836			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Instructor			10 Employer (See Instructions) Red Bird Pilates		

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2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Sheng T Chen		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 5000 Mission Oaks Blvd Unit 24 Austin, TX 78735-6742			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Dentist			10 Employer (See Instructions) Self		
4. Date 12/10/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Yi Chen		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 11505 Lafitte Ln Austin, TX 78739-1462			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Homemaker			10 Employer (See Instructions) None		
4. Date 12/12/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Jim Chudleigh		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 7620 Deer Run Volente, TX 78641-6108			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Physician			10 Employer (See Instructions) Chudleigh PA		
4. Date 12/12/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Phyllis Chudleigh		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 7620 Deer Run Volente, TX 78641-6108			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Real Estate Agent			10 Employer (See Instructions) Self		

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The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/10/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Michael J. Cihock		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 5310 Musket Rdg Austin, TX 78759-6222			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Associate Attorney			10 Employer (See Instructions) Wills & Estate Lawyers		
4. Date 12/12/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Andrew Wilson Clements		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 4528 Ruiz St Austin, TX 78723-3331			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Architect			10 Employer (See Instructions) State of Texas DSHS		
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Rance Clouse		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 2001 S Mo Pac Expy Apt 924 Austin, TX 78746-7579			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Real Estate			10 Employer (See Instructions) Fortis Realty Services, LLC		
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Jeffrey Coddington		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 200 W Cesar Chavez St Ste 250 Austin, TX 78701-4049			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Real Estate			10 Employer (See Instructions) Cushman & Wakefield   Oxford Commercial		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC John Conley		7. Amount of contribution \$50.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 707 Cardinal Ln # C2 Austin, TX 78704-6910			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10. Employer (See Instructions)		
4. Date 12/08/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Kevin Cooper		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 2904 Mossback Ln Austin, TX 78739-4834			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Governmental Affairs Advisor			10. Employer (See Instructions) Independent Proprietor		
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Jacklyn Cooper-Williams		7. Amount of contribution \$50.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 2111 Bronte Dr Austin, TX 78752-2101			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10. Employer (See Instructions)		
4. Date 12/10/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Andrew Coulter		7. Amount of contribution \$25.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 302 W 38th St Apt 117 Austin, TX 78705-1403			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10. Employer (See Instructions)		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/08/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Ben Crenshaw		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code PO Box 50568 Austin, TX 78763-0568			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Professional Golfer			10 Employer (See Instructions) PGA Tour, Coore & Crenshaw		
4. Date 12/10/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Cecilia Crossley		7. Amount of contribution \$25.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 3100 Catalina Dr Austin, TX 78741-7035			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/12/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Julia Cuba		7. Amount of contribution \$100.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 2010 Hamilton Ave Austin, TX 78702-2822			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/11/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Sandra Cunningham		7. Amount of contribution \$50.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 4005 enclave Mesa circle Austin, TX 78731			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Mark J. Curry		7. Amount of contribution \$300.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 4000 Tablerock Dr Austin, TX 78731-1425			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Community Bank President			10 Employer (See Instructions) Wells Fargo		
4. Date 12/08/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Lisa Danley-Herring		7. Amount of contribution \$25.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 1000 E 38th St Austin, TX 78705-1813			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/11/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Ann Daughety		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 4001 Eagles Landing Cv Austin, TX 78735-6359			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Realtor			10 Employer (See Instructions) Stanberry and Associates		
4. Date 12/14/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Bill Davies		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 7425 Bonniebrook Dr Austin, TX 78735-1805			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Banker			10 Employer (See Instructions) Jp Morgan Chase bank NA		

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/14/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Polly B Davies		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 7425 Bonniebrook Dr Austin, TX 78735-1805		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) None			10 Employer (See Instructions) None		
4. Date 12/14/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Stephen Davis		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 200 Congress Ave Unit 41Q Austin, TX 78701-4565		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Retired			10 Employer (See Instructions) None		
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Justin Demerath		7. Amount of contribution \$50.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 808 West Ave Austin, TX 78701-2208		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Susan H Denn		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 3422 S Lamar Blvd Austin, TX 78704-7931		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Property Manager			10 Employer (See Instructions) Self		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Joe DiQuinzio		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
	6. Contributor address: City State ZIP Code 500 W 7th St Austin, TX 78701-2818		(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Real Estate			10 Employer (See Instructions) JadCo Development		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Matt Dow		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
	6. Contributor address: City State ZIP Code 6109 Shadow Mountain Dr Austin, TX 78731-4162		(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Lawyer			10 Employer (See Instructions) Jackson Walker L.L.P.		
4. Date 12/10/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Benita A. Dryden		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
	6. Contributor address: City State ZIP Code 4311 Bunny Run Austin, TX 78746-1020		(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Sr. Vice President			10 Employer (See Instructions) Commercial Texas		
4. Date 12/10/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Kenny Dryden		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
	6. Contributor address: City State ZIP Code 3303 Northland Dr Ste 212 Austin, TX 78731-4955		(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Owner			10 Employer (See Instructions) Kenny Dryden Investments		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Lenora DuBose		7. Amount of contribution \$100.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 8804 Collingwood Dr Austin, TX 78748-5205			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Claude Ducloux		7. Amount of contribution \$100.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 3512 Native Dancer Cv Austin, TX 78746-1434			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Justin Dunlap		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 4412 Rosedale Ave Austin, TX 78756-3224			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Assistant Attorney General			10 Employer (See Instructions) Attorney General of Texas		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC James Brandon Easterling		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 3411 Foothill Ter Austin, TX 78731-5826			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Real Estate			10 Employer (See Instructions) Alliance Residential		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/12/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Michael Edenbaum		7. Amount of contribution \$20.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 400 Soft Cloud Cv Austin, TX 78717-5485			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Mindy Ellmer		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 200 Congress Ave Unit 40FF Austin, TX 78701-4527			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Consultant			10 Employer (See Instructions) Self		
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Michael Engels		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 808 atterson Avenue Austin, TX 78703			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Real Estate			10 Employer (See Instructions) CWS Capital Partners		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Edward Espinoza		7. Amount of contribution \$100.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 507 Pressler St Apt 4131 Austin, TX 78703-5192			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Darrick Eugene		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 10101 Pinhurst Dr Austin, TX 78747-1303			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Attorney			10 Employer (See Instructions) Darrick W. Eugene & Associates, PC		
4. Date 12/11/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Michael Eyman		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 6313 Poncha Pass Austin, TX 78749-1883			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Supply Chain Manager			10 Employer (See Instructions) SunPower Corporation		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Judy Fisher		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 2602 Broken Oak Dr Austin, TX 78745-5900			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Vice President			10 Employer (See Instructions) Journeyman Group		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Robert W. Fisher		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 2602 Broken Oak Dr Austin, TX 78745-5900			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Residential Construction Inspector			10 Employer (See Instructions) Veritas		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Kevin Flahive		7. Amount of contribution \$25.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 5010 Finley Dr Austin, TX 78731-5612		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions)			10. Employer (See Instructions)		
4. Date 12/12/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Barbara Formichelli		7. Amount of contribution \$50.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 8209 Ito Cv Austin, TX 78729-8006		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions)			10. Employer (See Instructions)		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Hugh Forrest		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 703B E 50th St # B Austin, TX 78751-2615		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) event planner			10. Employer (See Instructions) SXSW		
4. Date 12/11/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Carol Fowler		7. Amount of contribution \$250.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 10 Woodstone Sq Austin, TX 78703-1164		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Retired			10. Employer (See Instructions) None		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/10/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Charles Francois		7. Amount of contribution \$100.00	8. In-kind contribution description (if applicable)	
	6. Contributor address: City State ZIP Code 5815 Buckpasser Cv. Austin, TX 78746-1450		(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/08/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Jean Freeland Graves		7. Amount of contribution \$250.00	8. In-kind contribution description (if applicable)	
	6. Contributor address: City State ZIP Code 900 W 17th St Austin, TX 78701-1007		(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Retired			10 Employer (See Instructions) None		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Regan Gammon III		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
	6. Contributor address: City State ZIP Code 3125 Hemphill Park Austin, TX 78705-2822		(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Vice President			10 Employer (See Instructions) Kimberlin Family Partnership		
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC William B. Gammon		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
	6. Contributor address: City State ZIP Code 8304 Zyle Rd Austin, TX 78737-3403		(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) attorney			10 Employer (See Instructions) Gammon Law Office, PLLC		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC William Gammon III		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 3125 Hemphill Park Austin, TX 78705-2822			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Insurance Agent			10 Employer (See Instructions) William Gammon Insurance		
4. Date 12/12/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Helmut Gass		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 2017 Buckley Ln Round Rock, TX 78664-4607			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Director			10 Employer (See Instructions) A1 Technology Products, Inc.		
4. Date 12/12/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Renate Gass		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 2017 Buckley Ln Round Rock, TX 78664-4607			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Accounting			10 Employer (See Instructions) DTLandgroup, Inc.		
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Mojdeh Gharbi		7. Amount of contribution \$250.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 5514 Shoalwood Ave Austin, TX 78756-1622			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) VP of Marketing & Operations			10 Employer (See Instructions) Certain Affinity, Inc.		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 63	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Kurt D Goll		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 1925 Cypress Pt W Austin, TX 78746-7108		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Real Estate			10 Employer (See Instructions) Carrington Oaks, LLC		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Michelle L Goll		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 1925 Cypress Pt W Austin, TX 78746-7108		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Interior Designer			10 Employer (See Instructions) Self		
4. Date 12/08/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Rex Gore		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 1304 W Oltorf St Austin, TX 78704-5333		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) President			10 Employer (See Instructions) PJs of Texas, Inc.		
4. Date 12/13/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Matthew Green		7. Amount of contribution \$200.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 2911 Stratford Dr Austin, TX 78746-4628		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Real Estate			10 Employer (See Instructions) The Kor Group		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 63	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/11/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Brad B Greenblum		7. Amount of contribution \$100.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 3345 Bee Caves Rd Ste 208 West Lake Hills, TX 78746-6766			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10. Employer (See Instructions)		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Bob Edward Gregory		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 2939 Westlake Cv Austin, TX 78746-1961			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Solid Waste & Recyclables			10. Employer (See Instructions) Texas Disposal Systems		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Kay Gregory		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 2939 Westlake Cv Austin, TX 78746-1961			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Homemaker			10. Employer (See Instructions) None		
4. Date 12/12/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Joshua Grimes		7. Amount of contribution \$100.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 1781 Spyglass Dr Apt 326 Austin, TX 78746-7919			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10. Employer (See Instructions)		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/12/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Beth Guillot		7. Amount of contribution \$100.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 2216 Thornton Rd Austin, TX 78704-5084			(If travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/13/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC David Hampton		7. Amount of contribution \$250.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 2508 Indian Trl Austin, TX 78703-2340			(If travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Chief Executive Officer			10 Employer (See Instructions) M87		
4. Date 12/14/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Greg Hartman		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 3307 Winding Creek Dr Austin, TX 78735-1474			(If travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) healthcare administration			10 Employer (See Instructions) Seton Healthcare Family		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Jeremy Hartman		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 1608 Haskell St # B Austin, TX 78702-5416			(If travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Attorney			10 Employer (See Instructions) State of Texas, Court of Criminal Appeals		

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Michele Haussmann		7. Amount of contribution \$50.00	8. In-kind contribution description (if applicable)	
	6. Contributor address: City State ZIP Code 5612 Parade Rdg Austin, TX 78731-3350		(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10. Employer (See Instructions)		
4. Date 12/12/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Becky Head		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
	6. Contributor address: City State ZIP Code 7502 Downridge Dr Austin, TX 78731-1106		(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Administrator			10. Employer (See Instructions) Morrison & Head		
4. Date 12/12/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Ray Head		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
	6. Contributor address: City State ZIP Code 7502 Downridge Dr Austin, TX 78731-1106		(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Partner			10. Employer (See Instructions) Morrison & Head, LP		
4. Date 12/09/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Marina Henderson		7. Amount of contribution \$100.00	8. In-kind contribution description (if applicable)	
	6. Contributor address: City State ZIP Code 1815 Rockmoor Ave Austin, TX 78703-2028		(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10. Employer (See Instructions)		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/08/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC William Herring			7. Amount of contribution \$25.00	8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 1000 E 38th St Austin, TX 78705-1813				(if travel outside of Texas, complete Schedule T)	
9. Principal occupation / Job title (See Instructions)				10. Employer (See Instructions)	
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Max Hoberman			7. Amount of contribution \$250.00	8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 5514 Shoalwood Ave Austin, TX 78756-1622				(if travel outside of Texas, complete Schedule T)	
9. Principal occupation / Job title (See Instructions) President				10. Employer (See Instructions) Certain Affinity, Inc.	
4. Date 12/08/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Michael Hochman			7. Amount of contribution \$100.00	8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 2305 Island Wood Rd Austin, TX 78733-2117				(if travel outside of Texas, complete Schedule T)	
9. Principal occupation / Job title (See Instructions)				10. Employer (See Instructions)	
4. Date 12/12/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Leon Holland			7. Amount of contribution \$25.00	8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 10705 Leafwood Ln Austin, TX 78750-3490				(if travel outside of Texas, complete Schedule T)	
9. Principal occupation / Job title (See Instructions)				10. Employer (See Instructions)	

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/12/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Peggy Holland		7. Amount of contribution \$25.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 10705 Leafwood Ln Austin, TX 78750-3490			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10. Employer (See Instructions)		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Wayne Hollingsworth		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 100 Congress Ave Ste 1300 Austin, TX 78701-2744			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Attorney			10. Employer (See Instructions) Armbrust & Brown, PLLC		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Paul Hornsby		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 15767 Booth Cir Leander, TX 78641-9684			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Appraiser			10. Employer (See Instructions) Paul Hornsby and Co.		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Christina C. Hsu		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 15224 Interlachen Dr Austin, TX 78717-3867			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Attorney			10. Employer (See Instructions) Self		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/10/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Patrick Hudson		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 7105 Beauford Dr Austin, TX 78750-8151			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Attorney			10 Employer (See Instructions) McLean & Howard, LLP		
4. Date 12/10/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Sarah Hudson		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 7105 Beauford Dr Austin, TX 78750-8151			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Creative Intern			10 Employer (See Instructions) Tangelo		
4. Date 12/10/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Kenneth Hunter		7. Amount of contribution \$50.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 4 Sugar Creek Dr West Lake Hills, TX 78746-5533			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Denise Hutto		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 1608 Haskell St # B Austin, TX 78702-5416			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Accounting			10 Employer (See Instructions) SXSX		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

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2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Kathy Hutto		7. Amount of contribution \$350.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 2607 Trail Of The Madrones Austin, TX 78746-2342			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Governmental Affairs Consultant			10 Employer (See Instructions) Jackson Walker LLP		
4. Date 12/10/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Carey Ibrahimbejovic		7. Amount of contribution \$20.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 2202 Rabb Glen St Austin, TX 78704-3948			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/08/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC William Ikard		7. Amount of contribution \$350.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 2901 Via Fortuna Ste 450 Austin, TX 78746-0007			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Partner			10 Employer (See Instructions) Ikard Wynne LLP		
4. Date 12/10/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Jonathan Ivester		7. Amount of contribution \$350.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 404 Rio Grande St 201 Austin, TX 78701-2862			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Senior Vice President			10 Employer (See Instructions) Silicon Labs		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

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2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC William Jang		7. Amount of contribution \$50.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 314 E Highland Mall Blvd Ste 406 Austin, TX 78752-3732			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10. Employer (See Instructions)		
4. Date 12/07/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Lance Johnson		7. Amount of contribution \$25.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 15521 Gustine Cv Austin, TX 78717-5424			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10. Employer (See Instructions)		
4. Date 12/07/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Robert Johnston		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 12710 Cedar St Austin, TX 78732-1806			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Retirement Plan Consultant and Advisor			10. Employer (See Instructions) VALIC		
4. Date 12/10/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Annette Jones		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 519 Buckeye Trl Austin, TX 78746-4425			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Homemaker			10. Employer (See Instructions) None		

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Brent Jones		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 5930 Highland Hills Dr Austin, TX 78731-4015		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Architect			10 Employer (See Instructions) American Realty		
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Charlie Jones		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 300 W 6th St Austin, TX 78701-3954		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Partner			10 Employer (See Instructions) C3 Presents		
4. Date 12/12/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC George Jones		7. Amount of contribution \$100.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 6102 Mountainclimb Dr Austin, TX 78731-3824		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Ginny Jones		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 3211 Stratford Hills Ln Austin, TX 78746-4684		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Homemaker			10 Employer (See Instructions) Self		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/10/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Ken Jones		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
	6. Contributor address: City State ZIP Code 519 Buckeye Trl West Lake Hills, TX 78746-4425		(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Attorney			10 Employer (See Instructions) Armbrust & Brown		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Laura Jones		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
	6. Contributor address: City State ZIP Code 5930 Highland Hills Dr Austin, TX 78731-4015		(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Digital Strategy			10 Employer (See Instructions) Self		
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Melanie Jones		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
	6. Contributor address: City State ZIP Code 4620 Lake View Dr Austin, TX 78731-4716		(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Homemaker			10 Employer (See Instructions) None		
4. Date 12/07/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Bret Kadison		7. Amount of contribution \$200.00	8. In-kind contribution description (if applicable)	
	6. Contributor address: City State ZIP Code 901 S Mo Pac Expy Ste 1-220 Austin, TX 78746-5908		(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Private Equity			10 Employer (See Instructions) Brazos Resources		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Paul Karagas		7. Amount of contribution \$5.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 6009 Club Ter Austin, TX 78741-3301		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions)			10. Employer (See Instructions)		
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC George Kasee		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 917 Challenger Lakeway, TX 78734-4209		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Business Development			10. Employer (See Instructions) Self		
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Michael L Kasper		7. Amount of contribution \$100.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 4002 Balcones Dr Austin, TX 78731-5702		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions)			10. Employer (See Instructions)		
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Russell Keene		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 2600 Maria Anna Rd Austin, TX 78703-1627		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Partner			10. Employer (See Instructions) Crossnore Group, LLC		

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## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Joseph Kelly		7. Amount of contribution \$50.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 411 Brazos St Apt 209 Austin, TX 78701-3635			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/11/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC William Kemp		7. Amount of contribution \$25.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 5300 Concho Creek Bnd Austin, TX 78735-6447			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/08/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Burke Kennedy		7. Amount of contribution \$250.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 603 Davis St 1209 Austin, TX 78701-4207			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Broker			10 Employer (See Instructions) Avison Young-Texas, LLC		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Kathleen Kerr		7. Amount of contribution \$250.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 1503 Wild Cat Holw West Lake Hills, TX 78746-3640			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) environmental consulting			10 Employer (See Instructions) KMKerr Environmental Consulting, Inc.		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/08/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Ramzi Khazen		7. Amount of contribution \$100.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 2604 Rollingwood Dr West Lake Hills, TX 78746-5646			(If travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Art Kidd		7. Amount of contribution \$200.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 411 W Saint Elmo Rd Apt 29 Austin, TX 78745-3377			(If travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Musician			10 Employer (See Instructions) Self		
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Kay Kidd		7. Amount of contribution \$200.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 411 W Saint Elmo Rd Apt 29 Austin, TX 78745-3377			(If travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) musician			10 Employer (See Instructions) Kay Kidd		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Bill King		7. Amount of contribution \$200.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 4507 Shoal Creek Blvd Austin, TX 78756-2912			(If travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Judge			10 Employer (See Instructions) Retired		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Frank King		7. Amount of contribution \$50.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 1601 Miriam Ave. Unit 221 Austin, TX 78702-1556			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10. Employer (See Instructions)		
4. Date 12/08/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Robert King		7. Amount of contribution \$200.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 4212 Park Hollow Ct Austin, TX 78746-1249			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Consultant			10. Employer (See Instructions) Good Company Associates		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Darin Klein		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 4004 Cherrywood Rd Austin, TX 78722-1222			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Comptroller			10. Employer (See Instructions) SXS		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Barney Knight		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 1008 Huntridge Dr Austin, TX 78758-3913			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Attorney			10. Employer (See Instructions) Knight & Partners		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Linda J Knight		7. Amount of contribution \$350.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 1008 Huntridge Dr Austin, TX 78758-3913			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) None			10 Employer (See Instructions) None		
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Daphne Konderla		7. Amount of contribution \$50.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 115 Squires Dr Lakeway, TX 78734-4658			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/10/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Scot Krieger		7. Amount of contribution \$100.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 2905 Montebello Ct Austin, TX 78746-6816			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Gregg Krumme		7. Amount of contribution \$350.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 10702 Hastings Ln Austin, TX 78750-4042			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Attorney			10 Employer (See Instructions) Armbrust & Brown PLLC		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler		3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/13/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Carolyn LaMarsh Thompson 6. Contributor address: City State ZIP Code 1710 Mount Larson Rd Austin, TX 78746-2962	7. Amount of contribution \$100.00 (if travel outside of Texas, complete Schedule T)	8. In-kind contribution description (if applicable)
9. Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4. Date 12/09/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Alan Laves 6. Contributor address: City State ZIP Code 6324 Bon Terra Dr Austin, TX 78731-3843	7. Amount of contribution \$350.00 (if travel outside of Texas, complete Schedule T)	8. In-kind contribution description (if applicable)
9. Principal occupation / Job title (See Instructions) Attorney		10 Employer (See Instructions) Akin Gump Strauss Hauer & Feld LLP	
4. Date 12/09/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Daemie Laves 6. Contributor address: City State ZIP Code 6324 Bon Terra Dr Austin, TX 78731-3843	7. Amount of contribution \$250.00 (if travel outside of Texas, complete Schedule T)	8. In-kind contribution description (if applicable)
9. Principal occupation / Job title (See Instructions) Homemaker		10 Employer (See Instructions) None	
4. Date 12/12/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Bruce Levy 6. Contributor address: City State ZIP Code 4000 Enclave Mesa Cir Austin, TX 78731-2142	7. Amount of contribution \$100.00 (if travel outside of Texas, complete Schedule T)	8. In-kind contribution description (if applicable)
9. Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/12/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Jonathan Levy		7. Amount of contribution \$150.00	8. In-kind contribution description (if applicable)	
	6. Contributor address: City State ZIP Code 4202 Deepwoods Dr Austin, TX 78731-2031		(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10. Employer (See Instructions)		
4. Date 12/12/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Marcia Levy		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
	6. Contributor address: City State ZIP Code 4000 Enclave Mesa Cir Austin, TX 78731-2142		(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) None			10. Employer (See Instructions) None		
4. Date 12/11/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Derek Lewis		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
	6. Contributor address: City State ZIP Code 2300 McCullough St Austin, TX 78703-1721		(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Real Estate			10. Employer (See Instructions) Stream Realty Partners		
4. Date 12/09/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Britt Lindelow		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
	6. Contributor address: City State ZIP Code 2502 Bridle Path Austin, TX 78703-3212		(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Homemaker			10. Employer (See Instructions) None		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

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2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/09/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Jan Lindelow		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 2502 Bridle Path Austin, TX 78703-3212			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) management consultant/semi-retired			10 Employer (See Instructions) self		
4. Date 12/10/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Gary Lindner		7. Amount of contribution \$75.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 421 Seventh St Comfort, TX 78013-2317			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/11/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Rachel Lomas		7. Amount of contribution \$250.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 212 W 33rd St Austin, TX 78705-2316			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Consultant			10 Employer (See Instructions) Self		
4. Date 12/10/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Joe R Long		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 2308 Woodlawn Blvd Austin, TX 78703-2417			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Investor			10 Employer (See Instructions) Joe R. Long Investments		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

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2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/10/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Teresa Long			7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 2308 Woodlawn Blvd Austin, TX 78703-2417				(if travel outside of Texas, complete Schedule T)	
9. Principal occupation / Job title (See Instructions) Retired				10 Employer (See Instructions) None	
4. Date 12/08/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Michele R Lynch			7. Amount of contribution \$25.00	8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 2634 Cascade Falls Dr Austin, TX 78738-5315				(if travel outside of Texas, complete Schedule T)	
9. Principal occupation / Job title (See Instructions)				10 Employer (See Instructions)	
4. Date 12/08/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Shaun Lynch			7. Amount of contribution \$25.00	8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 2634 Cascade Falls Dr Austin, TX 78738-5315				(if travel outside of Texas, complete Schedule T)	
9. Principal occupation / Job title (See Instructions)				10 Employer (See Instructions)	
4. Date 12/10/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Holly Mace			7. Amount of contribution \$100.00	8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 4907 Southcrest Dr Austin, TX 78746-5532				(if travel outside of Texas, complete Schedule T)	
9. Principal occupation / Job title (See Instructions)				10 Employer (See Instructions)	

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## SCHEDULE A

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2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Lucy Macqueen		7. Amount of contribution \$100.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 64 Sundown Pkwy Austin, TX 78746-5258			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Christopher Maher		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 111 Sandra Muraida Way Unit 11P Austin, TX 78703-5074			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Chief Executive Officer			10 Employer (See Instructions) Fosforus		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Carlyne M Majewski		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 1800 Parkside Ln Austin, TX 78745-3613			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Management			10 Employer (See Instructions) SXSU		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Alex Markled		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 11405 Eagles Glen Dr Austin, TX 78732-2088			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Executive Vice President			10 Employer (See Instructions) CDM Smith		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/10/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Kuzama N. Markled		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 11405 Eagles Glen Dr Austin, TX 78732-2088			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Homemaker			10 Employer (See Instructions) None		
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Steven Martens		7. Amount of contribution \$100.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 4708 Highland Ter Austin, TX 78731-5319			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Matthew D Martin		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 8700 Brodie Ln Apt 815 Austin, TX 78745-7942			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Realtor			10 Employer (See Instructions) Matt Martin Real Estate		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Vera Massaro		7. Amount of contribution \$50.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 3000 Savoy Pl Ste 201 Austin, TX 78757-4313			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/08/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Sally S Metcalfe		7. Amount of contribution \$25.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 901 S. Mopac Expressway, Plaza One, Suite 3600 Austin, TX 78746			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/08/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Steven Metcalfe		7. Amount of contribution \$25.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 388 Cortona Dr West Lake Hills, TX 78746-4438			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/12/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Hani Michel		7. Amount of contribution \$100.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 10503 Tweedsmuir Dr Austin, TX 78750-3445			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/12/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Soheir Michel		7. Amount of contribution \$100.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 10503 Tweedsmuir Dr Austin, TX 78750-3445			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/10/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Patrick McCluskey 6. Contributor address: City State ZIP Code 8002 Tallyho Trl Austin, TX 78729			7. Amount of contribution \$25.00 (if travel outside of Texas, complete Schedule T)	8. In-kind contribution description (if applicable)
9. Principal occupation / Job title (See Instructions)				10 Employer (See Instructions)	
4. Date 12/10/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Carlotta McLean 6. Contributor address: City State ZIP Code 2402 Rockmoor Ave Austin, TX 78703-1517			7. Amount of contribution \$350.00 (if travel outside of Texas, complete Schedule T)	8. In-kind contribution description (if applicable)
9. Principal occupation / Job title (See Instructions) Broker				10 Employer (See Instructions) Land Advisors Organization	
4. Date 12/10/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC William McLean 6. Contributor address: City State ZIP Code 2402 Rockmoor Ave Austin, TX 78703-1517			7. Amount of contribution \$350.00 (if travel outside of Texas, complete Schedule T)	8. In-kind contribution description (if applicable)
9. Principal occupation / Job title (See Instructions) Attorney				10 Employer (See Instructions) McLean & Howard, LLP, Real Property	
4. Date 12/08/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Robert McPartland 6. Contributor address: City State ZIP Code 3909 Pebble Path Austin, TX 78731-1401			7. Amount of contribution \$350.00 (if travel outside of Texas, complete Schedule T)	8. In-kind contribution description (if applicable)
9. Principal occupation / Job title (See Instructions) Retired				10 Employer (See Instructions) None	

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Pete McRae		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 807 Blanco St Austin, TX 78703-4966		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Partner			10 Employer (See Instructions) Bright Ray Energy Solutions		
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC AJ Meade		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 101 Crestwood Ct West Lake Hills, TX 78746-4693		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Insurance agent			10 Employer (See Instructions) Cantaro Advisors		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Nikelle Meade		7. Amount of contribution \$25.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 5363 Austral Loop Austin, TX 78739-1715		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/12/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Tom Mercer		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 5915 Bullard Dr Austin, TX 78757		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Real Estate			10 Employer (See Instructions) JTM Development, LLC		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

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2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Ronnie Miksch		7. Amount of contribution \$350.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 13016 Partridge Bend Dr Austin, TX 78729-6459			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Banker			10 Employer (See Instructions) Frost		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Don Miller		7. Amount of contribution \$350.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 512 E Riverside Dr Ste 200 Austin, TX 78704-1306			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) President and Owner			10 Employer (See Instructions) County Line Restaurants		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Mohammad K. Minhas		7. Amount of contribution \$350.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 1105 Huntridge Dr Austin, TX 78758-3946			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Partner			10 Employer (See Instructions) MKM Hotel Group LLC		
4. Date 12/12/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Scott Morse		7. Amount of contribution \$350.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 2630 Exposition Blvd Ste 119 Austin, TX 78703-1763			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Attorney			10 Employer (See Instructions) Law Office of Scott Morse		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/11/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Randa Myers		7. Amount of contribution \$100.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 5317 Old Spicewood Springs Rd. Austin, TX 78751		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions)			10. Employer (See Instructions)		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Robert Neblett		7. Amount of contribution \$350.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 6 Beecher Ln Austin, TX 78746-3218		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Attorney			10. Employer (See Instructions) Jackson Walker LLP		
4. Date 12/12/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC David Negrete		7. Amount of contribution \$175.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 1405 Tamar Ln Austin, TX 78727-3334		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions)			10. Employer (See Instructions)		
4. Date 12/12/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Diana Negrete		7. Amount of contribution \$175.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 1405 Tamar Ln Austin, TX 78727-3334		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions)			10. Employer (See Instructions)		

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## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Anne Nelson-Sweat		7. Amount of contribution \$50.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 8529 Dunsmere Dr Austin, TX 78749-3437			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Tom Nuckols		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 2910 Kassarine Pass Austin, TX 78704-4655			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) lawyer			10 Employer (See Instructions) Travis County		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Harriet O'Neill		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 919 Congress Ave Ste 1400 Austin, TX 78701-2114			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Attorney			10 Employer (See Instructions) Law Office of Harriet O'Neill		
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Guy Oliver		7. Amount of contribution \$300.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 1200 Verdant Way Austin, TX 78746-6767			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Senior management			10 Employer (See Instructions) Mtg Management Inc		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Jason Oliver		7. Amount of contribution \$300.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 3267 Bee Caves Rd Ste 107 Austin, TX 78746-6773			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Land Manager			10 Employer (See Instructions) V&S Enterprises		
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Kerianne Oliver		7. Amount of contribution \$300.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 1200 Verdant Way Austin, TX 78746-6767			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Homemaker			10 Employer (See Instructions) None		
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Stacy Oliver		7. Amount of contribution \$300.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 3267 Bee Caves Rd Ste 107 Austin, TX 78746-6773			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Owner			10 Employer (See Instructions) V&S Enterprises		
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Vicki Oliver		7. Amount of contribution \$300.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 3267 Bee Caves Rd Ste 107 Austin, TX 78746-6773			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Owner			10 Employer (See Instructions) V&S Enterprises		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Joe Osborn		7. Amount of contribution \$100.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 3612 Windsor Rd Austin, TX 78703-1538			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/12/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Elizabeth Ozmun		7. Amount of contribution \$100.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 1707 N River Hills Rd Apt B Austin, TX 78733-2700			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/10/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Alice Parkhouse		7. Amount of contribution \$50.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 203 Canyon Rim Dr Austin, TX 78746-5016			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/10/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC William Parkhouse		7. Amount of contribution \$50.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 203 Canyon Rim Dr Austin, TX 78746-5016			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

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2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Richard Parsons		7. Amount of contribution \$25.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 1502 Bluebonnet Ln Austin, TX 78704-2802			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/10/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Hanoch Patt		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 3005 Scenic Dr Austin, TX 78703-1057			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Physician			10 Employer (See Instructions) Pediatrx Medical Group		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC James Paver		7. Amount of contribution \$250.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 7301 Burnet Rd Ste 102 Austin, TX 78757-2255			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Director			10 Employer (See Instructions) Stepping Stone Schools		
4. Date 12/10/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Brent Peffer		7. Amount of contribution \$50.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 11403 Maidenstone Dr Austin, TX 78759-4431			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		

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2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC LaTonya Pegues		7. Amount of contribution \$25.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 1701 Intervail Dr Austin, TX 78746-7632			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10. Employer (See Instructions)		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Jesse Penn		7. Amount of contribution \$250.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 10924 Pilgrimage Dr Apt 214 Austin, TX 78754-6069			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Engineer			10. Employer (See Instructions) CP&Y, Inc.		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Wesley Peoples		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 7511 Fireoak Dr Austin, TX 78759-6439			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Builder			10. Employer (See Instructions) Wes Peoples Homes		
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Jim Person		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 1207B W 9th St Austin, TX 78703-4801			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Investor			10. Employer (See Instructions) Self		

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2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Lee H Person		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 1207B W 9th St Austin, TX 78703-4801		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Investor			10 Employer (See Instructions) Self		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Larry Peterson		7. Amount of contribution \$250.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 11011 Domain Dr Apt 8447 Austin, TX 78758-7779		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Consultant			10 Employer (See Instructions) Texas Foundation for Innovative Communities		
4. Date 12/11/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Tuan Pham		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 2108 Hartford Rd Austin, TX 78703-3125		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Solar Industry Professional			10 Employer (See Instructions) PowerFin Partners LLC		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Shannon Powers		7. Amount of contribution \$25.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 5010 Finley Dr Austin, TX 78731-5612		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		

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## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/07/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Gary Prant		7. Amount of contribution \$50.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 6602 Ladera Norte Austin, TX 78731-2692			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/07/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Michele Prant		7. Amount of contribution \$50.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 6602 Ladera Norte Austin, TX 78731-2692			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/13/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Austin Pyhrr		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 10806 River Terrace Cir Austin, TX 78733-1711			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Accountant			10 Employer (See Instructions) Ernst and Young		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Mason Quintana		7. Amount of contribution \$100.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 3007 Stardust Dr Austin, TX 78757-2044			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		

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2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Agatha Rady		7. Amount of contribution \$350.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 13276 N Highway 183 Ste 105 Austin, TX 78750-3225		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Retired			10 Employer (See Instructions) None		
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Richard Z Rady		7. Amount of contribution \$350.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 13276 N Highway 183 Ste 105 Austin, TX 78750-3225		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Retired			10 Employer (See Instructions) None		
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Jim Ray		7. Amount of contribution \$350.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 518 Cliff Dr Austin, TX 78704-1413		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Public Affairs Consulting			10 Employer (See Instructions) Ray Associates, Inc.		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Julian Read		7. Amount of contribution \$350.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 3702 Balcones Dr Austin, TX 78731-5806		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) retired			10 Employer (See Instructions) none		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Carl Richie		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 11208 Sacahuista Ct Austin, TX 78750-3416		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Attorney			10 Employer (See Instructions) Self Employed		
4. Date 12/07/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Jonathan Ring		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 1305 Hillside Ave Austin, TX 78704-1826		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Founder			10 Employer (See Instructions) Caringo, Inc.		
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Wes Ritchie		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 1601 Surrey Hill Dr Austin, TX 78746-7337		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Attorney			10 Employer (See Instructions) Rash Chapman Schreiber Leaverton & Morrison		
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Jim Ritts		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 1405 Woodlawn Blvd Austin, TX 78703-3420		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Executive Director			10 Employer (See Instructions) Austin Theatre Alliance		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/13/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Brett Robinson		7. Amount of contribution \$175.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 1913 Cross Draw Trl Leander, TX 78641-8682			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10. Employer (See Instructions)		
4. Date 12/13/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Robbie Robinson		7. Amount of contribution \$175.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 1913 Cross Draw Trl Leander, TX 78641-8682			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10. Employer (See Instructions)		
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Sara Rodell		7. Amount of contribution \$150.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 421 W 3rd St Apt 709 Austin, TX 78701-4165			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10. Employer (See Instructions)		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Boo Ruiz		7. Amount of contribution \$100.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 7600 Basil Cv Austin, TX 78750-7937			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10. Employer (See Instructions)		

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2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Cookie Ruiz		7. Amount of contribution \$200.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 7600 Basil Cv Austin, TX 78750		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Executive Director			10 Employer (See Instructions) Ballet Austin		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Jamie Ruiz		7. Amount of contribution \$100.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 2612 W 12th St Unit 7 Austin, TX 78703-4508		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/11/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC JR Ruiz		7. Amount of contribution \$250.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 2612 W 12th St Unit 7 Austin, TX 78703-4508		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Management Consulting			10 Employer (See Instructions) Deloitte		
4. Date 12/11/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Riki Rushing		7. Amount of contribution \$100.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 1119 Redbud Trl West Lake Hills, TX 78746-3415		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		

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2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Derlis Salinas		7. Amount of contribution \$25.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 1221 S Mo Pac Expy Ste 365 Austin, TX 78746-7637			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/10/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Samuel Scheer		7. Amount of contribution \$20.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code PO Box 28399 Austin, TX 78755-8399			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Robert M Schmidt		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 3422 S Lamar Blvd Austin, TX 78704-7931			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Investor			10 Employer (See Instructions) Self		
4. Date 12/10/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Ben Schotz		7. Amount of contribution \$100.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 1711 San Gabriel St Austin, TX 78701-1028			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		

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2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/10/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Jane Schotz		7. Amount of contribution \$250.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 1711 San Gabriel St Austin, TX 78701-1028			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Teacher			10 Employer (See Instructions) Rawson Saunders School		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Caroline Schultz		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 13216 Mansfield Dr Austin, TX 78732-1725			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Homemaker			10 Employer (See Instructions) None		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Bruce Scrafford		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 100 Congress Ave Ste 1300 Austin, TX 78701-2744			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) lawyer			10 Employer (See Instructions) armbrust and brown		
4. Date 12/10/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Enrique Serna		7. Amount of contribution \$250.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 1307 Kinney Ave Apt 120 Austin, TX 78704-2279			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Senior Landscape Architect			10 Employer (See Instructions) Consort, Inc.		

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The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Rob Shands		7. Amount of contribution \$50.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 2525 S Lamar Blvd Apt 304 Austin, TX 78704-4789			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Rick Sheldon		7. Amount of contribution \$300.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 4006 Green Oak Dr Waco, TX 76710-1442			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) President			10 Employer (See Instructions) Rick Sheldon Real Estate, LLC		
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Ted Siff		7. Amount of contribution \$200.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 604 W 11th St Austin, TX 78701-2007			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Chief Operating Officer			10 Employer (See Instructions) Park Place Publications		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Dudley Simmons		7. Amount of contribution \$100.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 2412 Jarratt Ave Austin, TX 78703-2431			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 63	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Mike Sloan		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 4306 Ramsey Ave Austin, TX 78756-3207		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) energy consultant			10 Employer (See Instructions) Virtus Energy		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Susan Sloan		7. Amount of contribution \$100.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 4306 Ramsey Ave Austin, TX 78756-3207		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Karen Sonleitner		7. Amount of contribution \$100.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 1712 Pasadena Dr Austin, TX 78757-1842		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/08/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Nav Sooch		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 600 W 7th St Austin, TX 78701-2710		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Chief Operating Officer			10 Employer (See Instructions) Ketra, Inc		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/08/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Donald Stuart		7. Amount of contribution \$125.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 4105 Long Champ Dr Austin, TX 78746-1150			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/08/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Loraine Stuart		7. Amount of contribution \$125.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 4105 Long Champ Dr Austin, TX 78746-1150			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Alison Suttle		7. Amount of contribution \$25.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 100 Congress Ave Ste 1300 Austin, TX 78701-2744			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Richard Suttle		7. Amount of contribution \$25.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 100 Congress Ave Ste 1300 Austin, TX 78701-2744			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/11/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Alison Swartwood		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 12604 Rush Creek Ln Austin, TX 78732-1992			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Homemaker			10 Employer (See Instructions) None		
4. Date 12/11/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Slater Swartwood Jr.		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 12604 Rush Creek Ln Austin, TX 78732-1992			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Marketing			10 Employer (See Instructions) Force Multiplier Solutions/Busuard		
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Rommanee Swasdee		7. Amount of contribution \$100.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 201 S Tumbleweed Trl Austin, TX 78733-4012			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Roland Swenson		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 1507 Yaupon Valley Rd West Lake Hills, TX 78746-3400			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Director			10 Employer (See Instructions) SXSX		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/09/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Rusty Tally		7. Amount of contribution \$199.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 54 Rainey St Ph 22 Austin, TX 78701-4387		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Sr. Vice President - Investments			10 Employer (See Instructions) UBS Financial Services Inc.;The Tally Group		
4. Date 12/12/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Rusty Tally		7. Amount of contribution \$151.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 54 Rainey St Ph 22 Austin, TX 78701-4387		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Sr. Vice President - Investments			10 Employer (See Instructions) UBS Financial Services Inc.;The Tally Group		
4. Date 12/12/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Eric Taube		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 2201 Four Oaks Ln Austin Austin, TX 78704-4626		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) attorney			10 Employer (See Instructions) self		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Scott Taylor		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 10919 Enchanted Rock Cv Austin, TX 78726-1336		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Attorney			10 Employer (See Instructions) Armbrust & Brown		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/12/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Tim Tekippe		7. Amount of contribution \$100.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 13521 Coletto Creek Trl Austin, TX 78732-2073		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions)			10. Employer (See Instructions)		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Lawrence E Temple		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 400 W 15th St Ste 1510 Austin, TX 78701-1648		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Attorney			10. Employer (See Instructions) Self		
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Travis Thomas		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 4500 Tortuga Cv Austin, TX 78731-4541		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) consultant			10. Employer (See Instructions) The Monument Group		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Jeff Thompson		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 401 Black Wolf Run Austin, TX 78738-1764		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Sales			10. Employer (See Instructions) Liquid Environmental Solutions		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Kenneth Thompson		7. Amount of contribution \$25.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 1117 Haverford Dr Austin, TX 78753-2009			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Barth Timmerman		7. Amount of contribution \$200.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 501 Vale St Austin, TX 78746-5732			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Real Estate			10 Employer (See Instructions) Greenvew Development		
4. Date 12/13/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Timothy Timmerman		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 2490 Fm 685 Hutto, TX 78634-5096			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Real Estate			10 Employer (See Instructions) self		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Nancy Tobias		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 512 E Riverside Dr Ste 200 Austin, TX 78704-1306			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Event Coordinator			10 Employer (See Instructions) County Line Restaurants		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/10/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC David Todd		7. Amount of contribution \$100.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 1304 Mariposa Dr Apt 211 Austin, TX 78704-4404			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10. Employer (See Instructions)		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Stephanie Todd		7. Amount of contribution \$100.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 1108 W 10th St Austin, TX 78703-4907			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10. Employer (See Instructions)		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Bobbi Topfer		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 210 Lavaca St Apt 3601 Austin, TX 78701-4606			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Retired			10. Employer (See Instructions) None		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Mort Topfer		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 210 Lavaca St Apt 3601 Austin, TX 78701-4606			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Retired			10. Employer (See Instructions) None		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Lambeth Townsend		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 1408 Hartford Rd Austin, TX 78703-3925		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Attorney			10 Employer (See Instructions) Lloyd Gosselink Rochelle & Townsend, P.C.		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Carlos Truan		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 13492 N Research Blvd Ste 120-112 Austin, TX 78750-2252		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Government Relations			10 Employer (See Instructions) Self		
4. Date 12/13/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Cal Varner		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 1211 E 11th St Austin, TX 78702-1964		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Government Relations			10 Employer (See Instructions) Varner & Associates, Inc.		
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC James David Walker		7. Amount of contribution \$100.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code PO Box 41 Milano, TX 76556-0041		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Tommy Walker		7. Amount of contribution \$100.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 700 Castle Ridge Rd Apt A Austin, TX 78746-5174		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Larry Warshaw		7. Amount of contribution \$350.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 1000 E 8th St Austin, TX 78702-3249		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Urban Development			10 Employer (See Instructions) Self		
4. Date 12/11/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Martie Wayne		7. Amount of contribution \$100.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 3902 Pebble Path Austin, TX 78731-1402		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/11/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Ralph Wayne		7. Amount of contribution \$100.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 3902 Pebble Path Austin, TX 78731-1402		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/10/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Matt Weldon		7. Amount of contribution \$20.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 9808 Grand Oak Dr Austin, TX 78750-3802			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10. Employer (See Instructions)		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Dan Wheelus		7. Amount of contribution \$350.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 3103 Bee Caves Rd 201 Austin, TX 78746-5586			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Attorney			10. Employer (See Instructions) C Daniel Wheelus Law Office		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Scott Wilcox		7. Amount of contribution \$350.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 2501 Quarry Rd Austin, TX 78703-3727			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Chief Technical Officer			10. Employer (See Instructions) SXSU		
4. Date 12/12/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Kumara Wilcoxon		7. Amount of contribution \$350.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 1625 Watchhill Rd Austin, TX 78703-2440			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Realtor			10. Employer (See Instructions) Kuper Sotheby's International Realty		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/08/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Carter Williams		7. Amount of contribution \$25.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 8209 Dark Ridge Cv Austin, TX 78737-3511		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions)			10. Employer (See Instructions)		
4. Date 12/08/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Talley Williams		7. Amount of contribution \$25.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 8209 Dark Ridge Cv Austin, TX 78737-3511		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions)			10. Employer (See Instructions)		
4. Date 12/15/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Mike Wilson		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 10810 Spicewood Pkwy Austin, TX 78750-3310		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Land Planner			10. Employer (See Instructions) Garrett-Ihnen Civil Engineers		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Michael Wilt		7. Amount of contribution \$25.00	8. In-kind contribution description (if applicable)	
6. Contributor address: City State ZIP Code 3306 Merrie Lynn Ave Austin, TX 78722-1609		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions)			10. Employer (See Instructions)		

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## SCHEDULE A

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2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/08/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC David Wolff		7. Amount of contribution \$350.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 1206 W 8th St Austin, TX 78703-5279			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) Attorney			10 Employer (See Instructions) Metcalfe Wolff Stuart & Williams, LLP		
4. Date 12/08/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Leslie S. Wolff		7. Amount of contribution \$350.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 1206 W 8th St Austin, TX 78703-5279			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) None			10 Employer (See Instructions) None		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Mitchel Wong		7. Amount of contribution \$150.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 1700 Stoneridge Ter Austin, TX 78746-7747			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Rose T Wong		7. Amount of contribution \$150.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 1700 Stoneridge Ter Austin, TX 78746-7747			(if travel outside of Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		

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The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/07/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Steven Yau		7. Amount of contribution \$100.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 9524 Ketona Cv Austin, TX 78759-6260		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/16/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Henry Yoshida		7. Amount of contribution \$350.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 300 S Lamar Blvd Apt 513 Austin, TX 78704-1159		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Consultant			10 Employer (See Instructions) MY Group, LLC		
4. Date 12/10/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Mark Zeppa		7. Amount of contribution \$150.00		8. In-kind contribution description (if applicable)
6. Contributor address: City State ZIP Code 4833 Spicewood Springs Rd Ste 202 Austin, TX 78759-8436		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/10/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Eddie Chao		7. Amount of contribution \$168.00		8. In-kind contribution description (if applicable) Food for volunteers
6. Contributor address: City State ZIP Code 5301 Fairhill Dr Austin, TX 78745-2745		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		

### ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A: 65	
2. FILER NAME Stephen Adler				3. ACCOUNT # (Ethics Commission Filers)	
4. Date 12/12/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Arthur Goldstein		7. Amount of contribution \$34.00	8. In-kind contribution description (if applicable) pizza for volunteers	
6. Contributor address: City State ZIP Code 1304 S 6th St Austin, TX 78704-2322		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
4. Date 12/10/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Kelly Lee		7. Amount of contribution \$300.00	8. In-kind contribution description (if applicable) Food for volunteers	
6. Contributor address: City State ZIP Code 12 Yellow Tail Cv Sunset Valley, TX 78745-2562		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Owner			10 Employer (See Instructions) China Palace Restaurant		
4. Date 12/12/2014	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Richard Ravel		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable) sign advertising	
6. Contributor address: City State ZIP Code 4335 Palladio Dr Austin, TX 78731-1801		(if travel outside of Texas, complete Schedule T)			
9. Principal occupation / Job title (See Instructions) Certified Pedorthist			10 Employer (See Instructions) Karavel Shoes Comfort Center		

### **ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

**LOANS****SCHEDULE E**

The Instruction Guide explains how to complete this form.

1. Total pages Schedule E:

1

2. FILER NAME Stephen Adler

3. ACCOUNT # (Ethics Commission Filers)

4. TOTAL OF UNITEMIZED LOANS:

\$0.00

5. Date of loan

12/23/2014

7. Name of lender

☐ out-of-state PAC \_\_\_\_\_

Stephen I. Adler

9. Loan Amount

\$65,000.00

6. Is lender a  
financial  
institution?☐ Y ☒ N

8. Lender address:

City

State

ZIP Code

3313 Lake Cliff Ct Austin, TX 78746-4676

10. Interest rate

0.00%

11. Maturity date

12. Principal occupation / Job title (See Instructions)

Attorney

13. Employer (See Instructions)

Barron &amp; Adler, LLP

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

18. Guarantor address:

City

State

ZIP Code

☐ not  
applicable

20. Principal Occupation (See Instructions)

21. Employer (See Instructions)

5. Date of loan

12/31/2014

7. Name of lender

☐ out-of-state PAC \_\_\_\_\_

Stephen I. Adler

9. Loan Amount

\$16,238.57

6. Is lender a  
financial  
institution?☐ Y ☒ N

8. Lender address:

City

State

ZIP Code

3313 Lake Cliff Ct Austin, TX 78746-4676

10. Interest rate

0.00%

11. Maturity date

12. Principal occupation / Job title (See Instructions)

Attorney

13. Employer (See Instructions)

Barron &amp; Adler, LLP

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

18. Guarantor address:

City

State

ZIP Code

☐ not  
applicable

20. Principal Occupation (See Instructions)

21. Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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. Total pages Schedule F: 29	2. FILER NAME Stephen Adler	3. ACCOUNT # (Ethics Commission Filers)
4 Date 12/15/2014	5 Payee name Nathan G. Armentrout	
6 Amount \$1,411.13	7 Payee address: City: State: Zip Code 3625 S 1st St Apt 115 Austin, TX 78704-7053	
8 <b>PURPOSE OF EXPENDITURE</b>	(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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/23/2014	5 Payee name Nathan G. Armentrout	
6 Amount \$1,584.00	7 Payee address: City: State: Zip Code 3625 S 1st St Apt 115 Austin, TX 78704-7053	
8 <b>PURPOSE OF EXPENDITURE</b>	(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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/17/2014	5 Payee name AT&T Mobility	
6 Amount \$136.76	7 Payee address: City: State: Zip Code PO Box 6463 Carol Stream, IL 60197-6463	
8 <b>PURPOSE OF EXPENDITURE</b>	(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) Cell Phone <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED



## POLITICAL EXPENDITURES

## SCHEDULE F

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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. Total pages Schedule F: 29	2. FILER NAME Stephen Adler	3. ACCOUNT # (Ethics Commission Filers)
4 Date 12/26/2014	5 Payee name AT&T Mobility	
6 Amount \$49.49	7 Payee address: City: State: Zip Code PO Box 6463 Carol Stream, IL 60197-6463	
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) Cell phone <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/13/2014	5 Payee name Barton Springs Center, Ltd.	
6 Amount \$1,180.12	7 Payee address: City: State: Zip Code 501 S Congress Ave Ste 400 Austin, TX 78704-1731	
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) Office Utilities <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
4 Date 12/19/2014	5 Payee name David Butts	
6 Amount \$2,000.00	7 Payee address: City: State: Zip Code 1914 Patton Ln Austin, TX 78723-1236	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description (If travel outside of Texas, complete Schedule T) Political Strategy Consultant <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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

## POLITICAL EXPENDITURES

## SCHEDULE F

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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. Total pages Schedule F: 29	2. FILER NAME Stephen Adler	3. ACCOUNT # (Ethics Commission Filers)
4 Date 12/15/2014	5 Payee name James A. Cannon	
6 Amount \$831.50	7 Payee address: City: State: Zip Code 2704 Rio Grande St Austin, TX 78705-4041	
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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/23/2014	5 Payee name James A. Cannon	
6 Amount \$831.50	7 Payee address: City: State: Zip Code 2704 Rio Grande St Austin, TX 78705-4041	
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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/10/2014	5 Payee name CheckMark Typesetting	
6 Amount \$4,822.33	7 Payee address: City: State: Zip Code 3217 N Interstate 35 Austin, TX 78722-2203	
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) Printing 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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

## POLITICAL EXPENDITURES

## SCHEDULE F

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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. Total pages Schedule F: 29	2. FILER NAME Stephen Adler	3. ACCOUNT # (Ethics Commission Filers)
4 Date 12/15/2014	5 Payee name Andrew Coulter	
6 Amount \$379.57	7 Payee address: City: State: Zip Code 302 W 38th St Apt 117 Austin, TX 78705-1403	
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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/23/2014	5 Payee name Andrew Coulter	
6 Amount \$379.57	7 Payee address: City: State: Zip Code 302 W 38th St Apt 117 Austin, TX 78705-1403	
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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/15/2014	5 Payee name Colin J. Dearwater	
6 Amount \$855.50	7 Payee address: City: State: Zip Code 2609 Salado St Austin, TX 78705-3911	
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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

## POLITICAL EXPENDITURES

## SCHEDULE F

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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. Total pages Schedule F: 29	2. FILER NAME Stephen Adler	3. ACCOUNT # (Ethics Commission Filers)
4 Date 12/23/2014	5 Payee name Colin J. Dearwater	
6 Amount \$855.50	7 Payee address: City: State: Zip Code 2609 Salado St Austin, TX 78705-3911	
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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/15/2014	5 Payee name Kolby Duhon	
6 Amount \$806.50	7 Payee address: City: State: Zip Code 600 S 1st St Apt 108 Austin, TX 78704-1101	
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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/23/2014	5 Payee name Kolby Duhon	
6 Amount \$806.50	7 Payee address: City: State: Zip Code 600 S 1st St Apt 108 Austin, TX 78704-1101	
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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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. Total pages Schedule F: 29	2. FILER NAME Stephen Adler	3. ACCOUNT # (Ethics Commission Filers)
4 Date 12/18/2014	5 Payee name Edward M. Shack	
6 Amount \$14,360.00	7 Payee address: City: State: Zip Code 221 E 9th St Ste 202 Austin, TX 78701-2510	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) Legal Services	(b) Description (If travel outside of Texas, complete Schedule T) Legal services <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/16/2014	5 Payee name FLS Connect	
6 Amount \$300.00	7 Payee address: City: State: Zip Code 7300 Hudson Blvd N Ste 270 Saint Paul, MN 55128-7143	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) Phone Calls <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
4 Date 12/08/2014	5 Payee name Frost Bank	
6 Amount \$4.00	7 Payee address: City: State: Zip Code 2425 Exposition Blvd Austin, TX 78703-2270	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description (If travel outside of Texas, complete Schedule T) Returned Check Fee <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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

## POLITICAL EXPENDITURES

## SCHEDULE F

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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. Total pages Schedule F: 29	2. FILER NAME Stephen Adler	3. ACCOUNT # (Ethics Commission Filers)
4 Date 12/31/2014	5 Payee name Frost Bank	
6 Amount \$15.00	7 Payee address: City: State: Zip Code 2425 Exposition Blvd Austin, TX 78703-2270	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description (If travel outside of Texas, complete Schedule T) Service Fee <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
4 Date 12/15/2014	5 Payee name Craig S. Garrison	
6 Amount \$888.76	7 Payee address: City: State: Zip Code 1517 Hether St Austin, TX 78704-3311	
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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/23/2014	5 Payee name Craig S. Garrison	
6 Amount \$888.76	7 Payee address: City: State: Zip Code 1517 Hether St Austin, TX 78704-3311	
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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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. Total pages Schedule F: 29	2. FILER NAME Stephen Adler	3. ACCOUNT # (Ethics Commission Filers)
4 Date 12/18/2014	5 Payee name GNI Consulting, LLC	
6 Amount \$10,522.06	7 Payee address: City: State: Zip Code PO Box 685008 Austin, TX 78768-5008	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description (If travel outside of Texas, complete Schedule T) Communication Consulting <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/19/2014	5 Payee name GNI Consulting, LLC	
6 Amount \$3,000.00	7 Payee address: City: State: Zip Code PO Box 685008 Austin, TX 78768-5008	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description (If travel outside of Texas, complete Schedule T) Communication Consulting <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/15/2014	5 Payee name Laura N Hernandez	
6 Amount \$1,920.75	7 Payee address: City: State: Zip Code 2408 Manor Rd 108 Austin, TX 78722	
8 <b>PURPOSE OF EXPENDITURE</b>	(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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

## POLITICAL EXPENDITURES

## SCHEDULE F

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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. Total pages Schedule F: 29	2. FILER NAME Stephen Adler	3. ACCOUNT # (Ethics Commission Filers)
4 Date 12/23/2014	5 Payee name Laura N Hernandez	
6 Amount \$8,176.75	7 Payee address: City: State: Zip Code 2408 Manor Rd 108 Austin, TX 78722	
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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/12/2014	5 Payee name Andrew Homer	
6 Amount \$2,150.00	7 Payee address: City: State: Zip Code 7200 Duval St Apt 207 Austin, TX 78752-2506	
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) Advertising mural <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
4 Date 12/15/2014	5 Payee name William Hughes	
6 Amount \$1,024.37	7 Payee address: City: State: Zip Code 1009 Hillside Oaks Dr Austin, TX 78745-5571	
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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED



## POLITICAL EXPENDITURES

## SCHEDULE F

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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. Total pages Schedule F: 29	2. FILER NAME Stephen Adler	3. ACCOUNT # (Ethics Commission Filers)
4 Date 12/23/2014	5 Payee name William Hughes	
6 Amount \$1,024.38	7 Payee address: City: State: Zip Code 1009 Hillside Oaks Dr Austin, TX 78745-5571	
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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/12/2014	5 Payee name Intuit Payroll	
6 Amount \$44.35	7 Payee address: City: State: Zip Code 2632 Marine Way 2632 Marine Way Mountain View, CA 94043-1126	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description (If travel outside of Texas, complete Schedule T) Payroll fee <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
4 Date 12/22/2014	5 Payee name Intuit Payroll	
6 Amount \$46.05	7 Payee address: City: State: Zip Code 2632 Marine Way 2632 Marine Way Mountain View, CA 94043-1126	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description (If travel outside of Texas, complete Schedule T) Payroll fee <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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

## POLITICAL EXPENDITURES

## SCHEDULE F

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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. Total pages Schedule F: 29	2. FILER NAME Stephen Adler	3. ACCOUNT # (Ethics Commission Filers)
4 Date 12/15/2014	5 Payee name Austin Jacobs	
6 Amount \$831.50	7 Payee address: City: State: Zip Code  115 Sandra Muraida Way Apt 222 Austin, TX 78703-4740	
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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/23/2014	5 Payee name Austin Jacobs	
6 Amount \$831.50	7 Payee address: City: State: Zip Code  115 Sandra Muraida Way Apt 222 Austin, TX 78703-4740	
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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/15/2014	5 Payee name Micah King	
6 Amount \$273.05	7 Payee address: City: State: Zip Code  4504 Ruiz St Austin, TX 78723-3331	
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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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. Total pages Schedule F: 29	2. FILER NAME Stephen Adler	3. ACCOUNT # (Ethics Commission Filers)
4 Date 12/23/2014	5 Payee name Micah King	
6 Amount \$273.05	7 Payee address: City: State: Zip Code 4504 Ruiz St Austin, TX 78723-3331	
8 <b>PURPOSE OF EXPENDITURE</b>	(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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/15/2014	5 Payee name Tiana Lopez	
6 Amount \$729.15	7 Payee address: City: State: Zip Code 8312 Hathaway Dr Austin, TX 78757-7731	
8 <b>PURPOSE OF EXPENDITURE</b>	(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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/23/2014	5 Payee name Tiana Lopez	
6 Amount \$729.15	7 Payee address: City: State: Zip Code 8312 Hathaway Dr Austin, TX 78757-7731	
8 <b>PURPOSE OF EXPENDITURE</b>	(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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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. Total pages Schedule F: 29	2. FILER NAME Stephen Adler	3. ACCOUNT # (Ethics Commission Filers)
4 Date 12/15/2014	5 Payee name Jessica Loyola	
6 Amount \$806.50	7 Payee address: City: State: Zip Code 2505B Teri Rd Austin, TX 78744-2963	
8 <b>PURPOSE OF EXPENDITURE</b>	(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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/23/2014	5 Payee name Jessica Loyola	
6 Amount \$1,375.12	7 Payee address: City: State: Zip Code 2505B Teri Rd Austin, TX 78744-2963	
8 <b>PURPOSE OF EXPENDITURE</b>	(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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/15/2014	5 Payee name Patrick J McDonald	
6 Amount \$942.11	7 Payee address: City: State: Zip Code 507 Strawberry Cv Austin, TX 78745-6425	
8 <b>PURPOSE OF EXPENDITURE</b>	(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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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. Total pages Schedule F: 29	2. FILER NAME Stephen Adler	3. ACCOUNT # (Ethics Commission Filers)
4 Date 12/23/2014	5 Payee name Patrick J McDonald	
6 Amount \$1,997.37	7 Payee address: City: State: Zip Code 507 Strawberry Cv Austin, TX 78745-6425	
8 <b>PURPOSE OF EXPENDITURE</b>	(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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/15/2014	5 Payee name James McKinney	
6 Amount \$375.00	7 Payee address: City: State: Zip Code 6917 Langston Dr Austin, TX 78723-2219	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description (If travel outside of Texas, complete Schedule T) Community Outreach <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
4 Date 12/19/2014	5 Payee name James McKinney	
6 Amount \$1,000.00	7 Payee address: City: State: Zip Code 6917 Langston Dr Austin, TX 78723-2219	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description (If travel outside of Texas, complete Schedule T) Community Outreach <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

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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. Total pages Schedule F: 29	2. FILER NAME Stephen Adler	3. ACCOUNT # (Ethics Commission Filers)
4 Date 12/15/2014	5 Payee name Jennifer E Mendoza	
6 Amount \$573.67	7 Payee address: City: State: Zip Code 1609 Poppy Seed Ln Austin, TX 78741-7514	
8 <b>PURPOSE OF EXPENDITURE</b>	(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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/23/2014	5 Payee name Jennifer E Mendoza	
6 Amount \$573.67	7 Payee address: City: State: Zip Code 1609 Poppy Seed Ln Austin, TX 78741-7514	
8 <b>PURPOSE OF EXPENDITURE</b>	(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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/15/2014	5 Payee name Midway Monarchs	
6 Amount \$1,500.00	7 Payee address: City: State: Zip Code 2015 E Riverside Dr Austin, TX 78741-1338	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description (If travel outside of Texas, complete Schedule T) Deposit for event <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

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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. Total pages Schedule F: 29	2. FILER NAME Stephen Adler	3. ACCOUNT # (Ethics Commission Filers)
4 Date 12/16/2014	5 Payee name Midway Monarchs	
6 Amount \$3,800.83	7 Payee address: City: State: Zip Code 2015 E Riverside Dr Austin, TX 78741-1338	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description (If travel outside of Texas, complete Schedule T) Election Night Event <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
4 Date 12/16/2014	5 Payee name Kayleen Nelson	
6 Amount \$450.00	7 Payee address: City: State: Zip Code 906 E 5th St Ste 104B Austin, TX 78702-3858	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description (If travel outside of Texas, complete Schedule T) Disc Jockey <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
4 Date 12/20/2014	5 Payee name New Partners Consulting, Inc.	
6 Amount \$20,160.21	7 Payee address: City: State: Zip Code 1250 I St NW Ste 200 Washington, DC 20005-5994	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description (If travel outside of Texas, complete Schedule T) Branding Consulting <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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. Total pages Schedule F: 29	2. FILER NAME Stephen Adler	3. ACCOUNT # (Ethics Commission Filers)
4 Date 12/15/2014	5 Payee name NGP VAN, INC	
6 Amount \$1,350.00	7 Payee address: City: State: Zip Code 1101 15th St NW Ste 500 Washington, DC 20005-5006	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) Credit Card Processing Fees <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/12/2014	5 Payee name Office Depot	
6 Amount \$697.11	7 Payee address: City: State: Zip Code 500 E Ben White Blvd Austin, TX 78704-7470	
8 <b>PURPOSE OF EXPENDITURE</b>	(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) Supplies <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/12/2014	5 Payee name Office Max Austin	
6 Amount \$168.84	7 Payee address: City: State: Zip Code 907 W 5th St Austin, TX 78703-5426	
8 <b>PURPOSE OF EXPENDITURE</b>	(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) Office Supplies <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
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Gift/Awards/Memorials Expense  
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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. Total pages Schedule F: 29	2. FILER NAME Stephen Adler	3. ACCOUNT # (Ethics Commission Filers)
4 Date 12/19/2014	5 Payee name Oliveira Public Communications	
6 Amount \$6,000.00	7 Payee address: City: State: Zip Code 4315 Guadalupe St Ste 303 Austin, TX 78751-3795	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description (If travel outside of Texas, complete Schedule T) Communications consulting services <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/13/2014	5 Payee name Opinion Analysts, Inc.	
6 Amount \$1,066.67	7 Payee address: City: State: Zip Code 906 Rio Grande St Austin, TX 78701-2222	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description (If travel outside of Texas, complete Schedule T) Data analytics consulting <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/19/2014	5 Payee name Opinion Analysts, Inc.	
6 Amount \$3,000.00	7 Payee address: City: State: Zip Code 906 Rio Grande St Austin, TX 78701-2222	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description (If travel outside of Texas, complete Schedule T) Data analytics consulting <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

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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. Total pages Schedule F: 29	2. FILER NAME Stephen Adler	3. ACCOUNT # (Ethics Commission Filers)
4 Date 12/15/2014	5 Payee name Marco A Orrantia	
6 Amount \$1,584.00	7 Payee address: City: State: Zip Code 7200 Easy Wind Dr Unit 1029 Austin, TX 78752-0003	
8 <b>PURPOSE OF EXPENDITURE</b>	(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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
4 Date 12/23/2014	5 Payee name Marco A Orrantia	
6 Amount \$4,861.50	7 Payee address: City: State: Zip Code 7200 Easy Wind Dr Unit 1029 Austin, TX 78752-0003	
8 <b>PURPOSE OF EXPENDITURE</b>	(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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
4 Date 12/15/2014	5 Payee name Jovita Pardo	
6 Amount \$1,049.38	7 Payee address: City: State: Zip Code 404 W Milton St Austin, TX 78704-3020	
8 <b>PURPOSE OF EXPENDITURE</b>	(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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
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Consulting Expense  
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Gift/Awards/Memorials Expense  
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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. Total pages Schedule F: 29	2. FILER NAME Stephen Adler	3. ACCOUNT # (Ethics Commission Filers)
4 Date 12/23/2014	5 Payee name Jovita Pardo	
6 Amount \$2,467.37	7 Payee address: City: State: Zip Code 404 W Milton St Austin, TX 78704-3020	
8 <b>PURPOSE OF EXPENDITURE</b>	(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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/23/2014	5 Payee name Chelsea E. Phelps	
6 Amount \$214.87	7 Payee address: City: State: Zip Code 7117 Wood Hollow Dr Apt 722 Austin, TX 78731-2551	
8 <b>PURPOSE OF EXPENDITURE</b>	(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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/15/2014	5 Payee name Rene A Prieto-Polymeris	
6 Amount \$864.26	7 Payee address: City: State: Zip Code 2215 Town Lake Cir Austin, TX 78741-3079	
8 <b>PURPOSE OF EXPENDITURE</b>	(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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

## POLITICAL EXPENDITURES

## SCHEDULE F

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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. Total pages Schedule F: 29	2. FILER NAME Stephen Adler	3. ACCOUNT # (Ethics Commission Filers)
4 Date 12/23/2014	5 Payee name Rene A Prieto-Polymeris	
6 Amount \$2,003.75	7 Payee address: City: State: Zip Code 2215 Town Lake Cir Austin, TX 78741-3079	
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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/16/2014	5 Payee name Progressive Waste Solutions of TX, Inc.	
6 Amount \$233.83	7 Payee address: City: State: Zip Code PO Box 17608 Austin, TX 78760-7608	
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) Trash Removal Services <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/12/2014	5 Payee name Rindy & Associates	
6 Amount \$1,755.74	7 Payee address: City: State: Zip Code 2401 E 6th St Apt 1007 Austin, TX 78702-3975	
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) Mail Advertising <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

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## POLITICAL EXPENDITURES

## SCHEDULE F

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials Expense  
Legal Services  
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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. Total pages Schedule F: 29	2. FILER NAME Stephen Adler	3. ACCOUNT # (Ethics Commission Filers)
4 Date 12/15/2014	5 Payee name Erik A Salinas	
6 Amount \$831.50	7 Payee address: City: State: Zip Code 5008 Hauna Ln Dickinson, TX 77539-5491	
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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
4 Date 12/23/2014	5 Payee name Erik A Salinas	
6 Amount \$1,411.12	7 Payee address: City: State: Zip Code 5008 Hauna Ln Dickinson, TX 77539-5491	
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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
4 Date 12/15/2014	5 Payee name David M. Siefken	
6 Amount \$396.57	7 Payee address: City: State: Zip Code 7704 Kiva Dr Austin, TX 78749-2916	
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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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. Total pages Schedule F: 29	2. FILER NAME Stephen Adler	3. ACCOUNT # (Ethics Commission Filers)
4 Date 12/23/2014	5 Payee name David M. Siefken	
6 Amount \$754.15	7 Payee address: City: State: Zip Code 7704 Kiva Dr Austin, TX 78749-2916	
8 <b>PURPOSE OF EXPENDITURE</b>	(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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/15/2014	5 Payee name Christian P Smith	
6 Amount \$991.11	7 Payee address: City: State: Zip Code 2810 Salado St Apt 129 Austin, TX 78705-3629	
8 <b>PURPOSE OF EXPENDITURE</b>	(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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/23/2014	5 Payee name Christian P Smith	
6 Amount \$2,080.37	7 Payee address: City: State: Zip Code 2810 Salado St Apt 129 Austin, TX 78705-3629	
8 <b>PURPOSE OF EXPENDITURE</b>	(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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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. Total pages Schedule F: 29	2. FILER NAME Stephen Adler	3. ACCOUNT # (Ethics Commission Filers)
4 Date 12/15/2014	5 Payee name Rayborn R. Stephenson	
6 Amount \$776.15	7 Payee address: City: State: Zip Code 3604 Brownwood Dr Austin, TX 78759-8912	
8 <b>PURPOSE OF EXPENDITURE</b>	(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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/23/2014	5 Payee name Rayborn R. Stephenson	
6 Amount \$776.15	7 Payee address: City: State: Zip Code 3604 Brownwood Dr Austin, TX 78759-8912	
8 <b>PURPOSE OF EXPENDITURE</b>	(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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/15/2014	5 Payee name Jason S Stinnett	
6 Amount \$793.15	7 Payee address: City: State: Zip Code 1907 1/2 E 16th Street Austin, TX 78702-1217	
8 <b>PURPOSE OF EXPENDITURE</b>	(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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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. Total pages Schedule F: 29	2. FILER NAME Stephen Adler	3. ACCOUNT # (Ethics Commission Filers)
4 Date 12/23/2014	5 Payee name Jason S Stinnett	
6 Amount \$1,391.78	7 Payee address: City: State: Zip Code  1907 1/2 E 16th Street Austin, TX 78702-1217	
8 <b>PURPOSE OF EXPENDITURE</b>	(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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/09/2014	5 Payee name The Austin Chronicle	
6 Amount \$1,845.00	7 Payee address: City: State: Zip Code  4000 N Interstate 35 Austin, TX 78751-4801	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) Print Advertising <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
4 Date 12/11/2014	5 Payee name The Austin Villager	
6 Amount \$1,008.00	7 Payee address: City: State: Zip Code  4132 E 12th St Austin, TX 78721-1905	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) Print Advertising <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

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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. Total pages Schedule F: 29	2. FILER NAME Stephen Adler	3. ACCOUNT # (Ethics Commission Filers)
4 Date 12/26/2014	5 Payee name Time Warner Cable	
6 Amount \$433.97	7 Payee address: City: State: Zip Code PO Box 60074 City Of Industry, CA 91716-0074	
8 <b>PURPOSE OF EXPENDITURE</b>	(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) Internet <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
4 Date 12/12/2014	5 Payee name United States Treasury	
6 Amount \$13,507.38	7 Payee address: City: State: Zip Code Eftps 1111 Constitution Ave Washington, DC 20224-0001	
8 <b>PURPOSE OF EXPENDITURE</b>	(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) Payroll Taxes <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/15/2014	5 Payee name Nicholas L Van Zandt	
6 Amount \$1,242.25	7 Payee address: City: State: Zip Code 3001 Bonnie Rd Austin, TX 78703-2807	
8 <b>PURPOSE OF EXPENDITURE</b>	(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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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## POLITICAL EXPENDITURES

## SCHEDULE F

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
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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. Total pages Schedule F: 29	2. FILER NAME Stephen Adler	3. ACCOUNT # (Ethics Commission Filers)
4 Date 12/23/2014	5 Payee name Nicholas L Van Zandt	
6 Amount \$3,298.75	7 Payee address: City: State: Zip Code 3001 Bonnie Rd Austin, TX 78703-2807	
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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/19/2014	5 Payee name Elizabeth Whitlow	
6 Amount \$250.00	7 Payee address: City: State: Zip Code PO Box 300846 Austin, TX 78703-0015	
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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/15/2014	5 Payee name Jim A Wick	
6 Amount \$2,822.25	7 Payee address: City: State: Zip Code 2611 Ektom Dr Apt D Austin, TX 78745-2629	
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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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## POLITICAL EXPENDITURES

## SCHEDULE F

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
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Salaries/Wages/Contract Labor  
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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. Total pages Schedule F: 29	2. FILER NAME Stephen Adler	3. ACCOUNT # (Ethics Commission Filers)
4 Date 12/23/2014	5 Payee name Jim A Wick	
6 Amount \$14,819.25	7 Payee address: City: State: Zip Code 2611 Ektom Dr Apt D Austin, TX 78745-2629	
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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
4 Date 12/15/2014	5 Payee name Michelle S Willoughby	
6 Amount \$942.11	7 Payee address: City: State: Zip Code 2704 Rio Grande St Apt 617 Austin, TX 78705-4282	
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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
4 Date 12/23/2014	5 Payee name Michelle S Willoughby	
6 Amount \$1,997.37	7 Payee address: City: State: Zip Code 2704 Rio Grande St Apt 617 Austin, TX 78705-4282	
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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
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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. Total pages Schedule F: 29	2. FILER NAME Stephen Adler	3. ACCOUNT # (Ethics Commission Filers)
4 Date 12/15/2014	5 Payee name Calvin R Wright	
6 Amount \$806.50	7 Payee address: City: State: Zip Code  1919 Willow Creek Dr Austin, TX 78741-4440	
8 <b>PURPOSE OF EXPENDITURE</b>	(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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/23/2014	5 Payee name Calvin R Wright	
6 Amount \$1,375.12	7 Payee address: City: State: Zip Code  1919 Willow Creek Dr Austin, TX 78741-4440	
8 <b>PURPOSE OF EXPENDITURE</b>	(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) Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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**CAMPAIGN DEBT RECONCILIATION**  
(To be filed by officeholders only during an election year)  
Period Covered: January 1, 2014 to December 31, 2014

Name of officeholder: Stephen Adler

Campaign debt\* existing as of the first day of the calendar year: 0

Campaign debt\* existing as of the last day of the calendar year: 432,481.63

Enter the following information on all campaign debt existing as of December 31 of the reporting year  
(Note: Campaign debts under \$50 may be reported as an aggregate under (c), below):

(a) For loans and other debt evidenced by a note, the name of the creditor, the principal amount owed, the interest rate, and the date of maturity:

Creditor	Principal amount owed	Interest rate	Date of maturity

(b) For all other campaign debts, enter the name of the creditor and the principal amount owed:

Creditor/Vendor	Principal amount owed
Bank of America Mastercard	\$5,499.69
Payroll Taxes	\$39,106.04
Stephen Adler	\$387,238.57
Total of outstanding checks	\$40,749.81

(c) Enter the total of campaign debts under \$50 if they are not itemized under (a) or (b) above.

*\* Campaign debt is the actual outstanding obligation of the candidate or candidate's committee as of a particular date, minus all funds held by the candidate or candidate's committee in cash or bank accounts on that date.*

## BANK RECONCILIATION

A candidate, officeholder, or campaign committee filing a January 15 year-end contribution and expenditure report shall provide the following information for the previous calendar year.

Name of candidate, officeholder or campaign committee: Stephen Adler

For each checking, savings or other financial institution account maintained during 20\_\_\_\_, enter the following information indicated. For each additional institution, use a copy of this schedule.

The name of the financial institution: Frost Bank

Type of account: Checking

The beginning balance: 0

The ending balance: 40,112.48

Enter the following information for checks issued on that account that have not cleared by December 31:

Date	Payee	Amount
12/2/14	Laura Hernandez	34.60
12/18/14	Edward M. Shack	14,360.00
12/19/14	Oliveira Public Communications	6,000.00
12/20/14	New Partners Consulting, Inc.	20,160.21
10/29/14	Gregory A. Copp, Inc.	175.00
11/26/14	Nathan Armentrout	20.00

Enter the following information for checks received as contributions and deposited but dishonored by the contributor's financial institution:

Date of receipt	Contributor	Amount
12/2/14	Thomas Blodgett Jr. and Christina Blodgett	700.00

SCHEDULE ATX. 4 - attach to form C/OH (C&E)  
Reference § 2-2-25, Austin City Code

Amount of interest or dividends earned: 0

All deposits and withdrawals not disclosed on a filed contribution and expenditure report:

Date of deposit or withdrawal	Amount of deposit	Amount of withdrawal
None		

A listing of all checks received by December 31 but not deposited into any account (whether or not the checks have been "accepted" within the definition of the Texas Election Code):

Date of receipt	Contributor	Amount
None		