

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: 24
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mrs	FIRST Laura	MI
	NICKNAME	LAST Pressley	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX;	APT / SUITE #;	CITY; STATE; ZIP CODE
	P.O Box 10102 Austin, Tx 78766		
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE (512)	PHONE NUMBER 762-3825	EXTENSION
	MS / MRS / MR Mr.	FIRST Jason	MI F
6 CAMPAIGN TREASURER NAME	NICKNAME	LAST Wahoski	SUFFIX
	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY; STATE; ZIP CODE
7 CAMPAIGN TREASURER ADDRESS (residence or business)	3715 Bird House Drive Round Rock, Texas 78665		
	AREA CODE (512)	PHONE NUMBER 656-3796	EXTENSION
8 CAMPAIGN TREASURER PHONE			
	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
	11 /	14 /	2011
THROUGH		Month	Day
		12 /	31 /
		2011	
11 ELECTION	ELECTION DATE		ELECTION TYPE
	Month	Day	Year
5 /	12 /	2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if known)
			City Council

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

14 C/OH NAME Laura Pressley

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 pages

**17 CONTRIBUTION
TOTALS**

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$ \$3,100

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

**EXPENDITURE
TOTALS**

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$ \$767.49

4. TOTAL POLITICAL EXPENDITURES \$

**CONTRIBUTION
BALANCE**

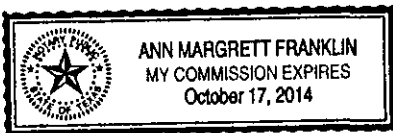
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$ 2,332.51

**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.



[Handwritten Signature]
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Laura Ann Pressley, this the 17 day of January, 20 12, to certify which, witness my hand and seal of office.

[Handwritten Signature] Ann Margaret Franklin Notary

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: 9	
2 FILER NAME Laura Pressley		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 12/10/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linda Greene	7 Amount of contribution (\$) 25	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 2239 Cromwell Cir Austin TX 78741		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) Agent		10 Employer (See Instructions) Continental Airlines	
Date 12/31/2011	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: _____) Sydney McQuade	Amount of contribution (\$) 25	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 716 W. Argand St Seattle WA 98119		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) Living Social	
Date 12/23/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon Walton	Amount of contribution (\$) 200	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 8207 Ganttcrest Dr. Austin TX 78749		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Software		Employer (See Instructions) Playdom	
Date 12/10/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mike Ford	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1750 Timber Ridge Rd, #116 Austin TX 78741		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 12/10/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rick McGinnis	Amount of contribution (\$) 10	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 612 W. 34th St. Austin TX 78705		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Liberty Stickers	

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: 9	
2 FILER NAME Laura Pressley		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 12/10/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harlan Deitrich	7 Amount of contribution (\$) 25	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 1205 Fieldcrest Dr. Austin TX 78704		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) Owner		10 Employer (See Instructions) Brave New Books	
Date 12/10/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leif Allred	Amount of contribution (\$) 350	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Applied Materials	
Date 12/10/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joyce Witowshi	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3201 Barton Place Cir Austin TX 78733		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Freescale Semiconductor, Inc.	
Date 12/10/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charles Swail	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1214 Baron Hills Dr. #106 Austin TX 78704		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Peoples Pharmacy	
Date 12/10/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rae Nader-Olenick	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P.O.Box 7486 Austin TX 78713		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self	

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: 9

2 FILER NAME Laura Pressley

3 ACCOUNT # (Ethics Commission Filers)

4 Date
12/10/2011

5 Full name of contributor out-of-state PAC (ID#: _____)
Niamh Marnell

7 Amount of contribution (\$) \$10.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
11316 Jollyville Rd, #348 Austin TX 78759

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)
Journalist

10 Employer (See Instructions)
Self

Date
12/10/2011

Full name of contributor out-of-state PAC (ID#: _____)
Jeneen Scholz
Contributor address; City; State; Zip Code

Amount of contribution (\$) \$20.00

In-kind contribution description (if applicable)

2805 Rock Terrace Dr. Austin TX 78704

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Director

Employer (See Instructions)
Peoples Pharmacy

Date
12/10/2011

Full name of contributor out-of-state PAC (ID#: _____)
Otto Wheeler
Contributor address; City; State; Zip Code
500 Wilmes Austin TX 78752

Amount of contribution (\$) \$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
CPA

Employer (See Instructions)
Wheeler, Fairman, and Kelley

Date
12/26/2011

Full name of contributor out-of-state PAC (ID#: _____)
Casey Pennington
Contributor address; City; State; Zip Code
6800 McNeil Dr. #1618 Austin TX 78729

Amount of contribution (\$) \$35.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Broadcast Technician

Employer (See Instructions)
Self

Date
12/10/2011

Full name of contributor out-of-state PAC (ID#: _____)
Cathy Savage
Contributor address; City; State; Zip Code
2212 White Horse Trail Austin TX 78757

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)
Artist

Employer (See Instructions)
Self

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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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: 9	
2 FILER NAME Laura Pressley		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 12/10/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffrey Blumenthal	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 6416 Via Careto Dr. Austin TX 78749		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) Architect		10 Employer (See Instructions) Dell	
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) Enterprise Architect		Employer (See Instructions) Dell	
Date 12/10/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John ScottLyman	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3300 Enfield RdAustin TX 78703		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Sport		Employer (See Instructions) Self	
Date 12/10/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John ScottWilliams	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 11615 Angus Rd #104NAustin TX 78759		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Self	
Date 12/10/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) K.F. Carbone	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2710 W. 49th 1/2 St Austin TX 78731		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) technical Writer		Employer (See Instructions) Retired	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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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: 9	
2 FILER NAME Laura Pressley		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 12/10/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christopher Hauboldt	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 9611 A Nightier Dr Austin TX 78748		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) Software Developer		10 Employer (See Instructions) Lone Star Internet	
Date 12/10/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephen and MercedesOsella	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 7305 Waterline Rd Austin TX 78731		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Software Eng		Employer (See Instructions) National Instruments	
Date 12/12/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anthony Corey	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3955 Shoal Creek Blvd, #210 Austin TX 78756		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions)	
Date 12/10/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) W. RussellDoyle	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3431 N. Hills Drive #J218Austin TX 78731		(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 <input type="checkbox"/> out-of-state PAC (ID#: _____) KathyStimets-Vidan	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 500 Wilmes Austin TX 78752		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Sociography		Employer (See Instructions) Renaissance	

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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: 9	
2 FILER NAME Laura Pressley		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 12/10/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linda Patterson	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 1015 E. Yeager #174 TX 78753		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) SP		10 Employer (See Instructions) Carthlink	
Date 12/10/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillip Greene	Amount of contribution (\$) \$35.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1003 Bouldin Ave Austin TX 78704		(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 <input type="checkbox"/> out-of-state PAC (ID#: _____) Sylvia Smith	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P.O. Box 5428 Austin TX 78763		(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 <input type="checkbox"/> out-of-state PAC (ID#: _____) Cory Walton	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1701 Bouldin Ave Austin TX 78704		(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 <input type="checkbox"/> out-of-state PAC (ID#: _____) Brent Brewer	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P.O. Box 17532 Austin TX 78760		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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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: 9

2 FILER NAME Laura Pressley

3 ACCOUNT # (Ethics Commission Filers)

4 Date

12/10/2011

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

6 Contributor address; City; State; Zip Code

1040 Kensington Castle Pflugerville TX 78660

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

12/10/2011

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

Contributor address; City; State; Zip Code

121 Countryside Ct Georgetown TX 78626

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

12/10/2011

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

Contributor address; City; State; Zip Code

12607 Mystic Dr. Manchaca TX 78652

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

12/10/2011

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

Contributor address; City; State; Zip Code

2409 S. 6th 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

12/26/2011

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

Contributor address; City; State; Zip Code

2006 A Kenneth Ave Austin TX 78744

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)

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: 9

2 FILER NAME Laura Pressley

3 ACCOUNT # (Ethics Commission Filers)

4 Date

12/10/2011

5 Full name of contributor

David Ring

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$20.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

1405 Poppy Seed Ln Austin TX 78741

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

12/10/2011

Full name of contributor

Kelly Melnyk

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$20.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

5608 Taylorcrest Dr. TX 78749

(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

Darcy Bloom

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$10.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

5002 Suburban Dr. #2 Austin TX 78745

(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

Lani Dame

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$10.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

600 Barwood Park #725 Austin TX 78753

(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

Darren Lehmann

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$10.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

2000 S. Lakeline Blvd, #722 Cedar Park TX 78613

(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: 9

2 FILER NAME Laura Pressley 3 ACCOUNT # (Ethics Commission Filers)

4 Date 12/10/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Giovanni Jimenez	7 Amount of contribution (\$) \$10.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 2101 A. Winsted Lane Austin TX 78703		(If travel outside of Texas, complete Schedule T)	

9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions)

Date 12/10/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brad Kizer	Amount of contribution (\$) \$10.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P.O. Box 2692 Austin TX 78768		(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# _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor 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 contributor <input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor 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 contributor <input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor 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: 1

2 FILER NAME Laura Pressley

3 ACCOUNT # (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨

\$

5 Date of loan
12/2/2011

7 Name of lender out-of-state PAC (ID#: _____)
Pure Rain LLC

9 Loan Amount (\$) \$500.00

6 Is lender a financial institution?
Y N

8 Lender address; City; State; Zip Code
2210 White Horse Trail Austin TX 78757

10 Interest rate 0%

11 Maturity date May 2012

12 Principal occupation / Job title (See Instructions)
Owner

13 Employer (See Instructions)
Pure Rain LLC

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 (See Instructions)

21 Employer (See Instructions)

Date of loan

Name of lender 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
 none

Check if personal funds were deposited into political account

GUARANTOR INFORMATION
 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	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.

1 Total pages Schedule F:	2 FILER NAME Laura Pressley	3 ACCOUNT # (Ethics Commission Filers)
4 Date 12/5/2011	5 Payee name Google	
6 Amount (\$) \$0.50	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting	(b) Description (If travel outside of Texas, complete Schedule T) Bank Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/7/2011	Payee name BumperSTicker.com	
Amount (\$) \$168.87	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) Stickers, Banner
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/10/2011	Payee name Scholz Garten	
Amount (\$) \$32.00	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event	Description (If travel outside of Texas, complete Schedule T) Kick-Off Party Food/Beverages
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/10/2011	Payee name Kinkos	
Amount (\$) \$252.57	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertisement	Description (If travel outside of Texas, complete Schedule T) Campaign Signs
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	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.

1 Total pages Schedule F:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
4 Date 12/15/2011	5 Payee name PayPal	
6 Amount (\$) \$0.09	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting	(b) Description (If travel outside of Texas, complete Schedule T) Bank Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/16/2011	Payee name Eventbrite	
Amount (\$) \$37.92	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event	Description (If travel outside of Texas, complete Schedule T) Event Registration
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/19/2011	Payee name Austin Java	
Amount (\$) \$20.00	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) Strategy Meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/19/2011	Payee name BumperSTicker.com	
Amount (\$) \$81.19	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertisement	Description (If travel outside of Texas, complete Schedule T) Business Cards
Complete <u>ONLY</u> 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	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.

1 Total pages Schedule F:	2 FILER NAME Laura Pressley	3 ACCOUNT # (Ethics Commission Filers)
4 Date 12/19/2011	5 Payee name Visa Debit PayPal	
6 Amount (\$) \$1.95	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Banking	(b) Description (If travel outside of Texas, complete Schedule T) Bank Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/21/2011	Payee name Courtyard	
Amount (\$) \$6.60	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead Expense	Description (If travel outside of Texas, complete Schedule T) Internet Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/22/2011	Payee name Speedway Copy	
Amount (\$) \$22.19	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) Printing
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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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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.

1 Total pages Schedule G:	2 FILER NAME Laura Pressley	3 ACCOUNT # (Ethics Commission Filers)
4 Date 12/5/2011	5 Payee name House Account Parking	
6 Amount (\$) \$10.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Travel	(b) Description (If travel outside of Texas, complete Schedule T) Parking
Date 12/7/2011	Payee name Arpeggio Grill	
Amount (\$) \$18.00 <input checked="" 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) Food / Beverage Expense	Description (If travel outside of Texas, complete Schedule T) Strategy Lunch
Date 12/9/2011	Payee name Speedway Printing	
Amount (\$) \$5.03 <input checked="" 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) Advertising	Description (If travel outside of Texas, complete Schedule T) Printing
Date 12/9/2011	Payee name Arpeggio Grill	
Amount (\$) \$8.61 <input checked="" 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) Food / Beverage Expense	Description (If travel outside of Texas, complete Schedule T) Strategy Lunch

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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.

1 Total pages Schedule G:		2 FILER NAME Laura Pressley		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 12/10/2011		5 Payee name Johnson's Backyard Garden			
6 Amount (\$) \$7.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Event Expense		(b) Description (If travel outside of Texas, complete Schedule T) Kick-Off Party Supplies	
Date 12/10/2011		Payee name Bikkum Farms			
Amount (\$) \$10.00 <input checked="" 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) Event Expense		Description (If travel outside of Texas, complete Schedule T) Kick-Off Party Supplies	
Date 12/10/2011		Payee name Hobby Lobby			
Amount (\$) \$3.78 <input checked="" 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) Event Expense		Description (If travel outside of Texas, complete Schedule T) Kick-Off Party Supplies	
Date 12/10/2011		Payee name Central Market			
Amount (\$) \$27.31 <input checked="" 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) Event Expense		Description (If travel outside of Texas, complete Schedule T) Kick-Off Party Supplies	

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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.

1 Total pages Schedule G:	2 FILER NAME Laura Pressley	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 12/10/2011	5 Payee name Goodwill
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6 Amount (\$) \$3.24 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event	(b) Description (If travel outside of Texas, complete Schedule T) Kick-Off Party Supplies
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Date 12/13/2011	Payee name Office Max
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Amount (\$) \$21.64 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertisement	Description (If travel outside of Texas, complete Schedule T) Printing
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Date 12/20/2011	Payee name DoodleKit
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Amount (\$) \$29.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead	Description (If travel outside of Texas, complete Schedule T) Website Hosting
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Date	Payee name
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Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	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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