FORM COR-C/OH

CORRECTION AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

1	ACCOUNT#		2 Total	pages filed:		OFFICE	USE ONL	Υ
3	CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRS	Sheryl		MI SUFFIX	Date Received	2010 RUG	AUST POSTI
4	ORIGINAL REPORT TYPE	January 15 July 15 X 30th day before election 8th day before election	Runoff Exceeded \$50 15th day after appointment Final report	DO limit	ar (specify)	Date Hand-delivered of Receipt # Legal Date Processed	Amount O	IN CITY CLEF
5	ORIGINAL PERIOD COVERED	Month Day Year 01 01 2009	THROUGH	Month D 30	Year 2009	Date Imaged	_ದ್	盖
6	This amended report contains the following corrections: corrected contributor names with first initials (as shown on their checks) to include full first names for Mozelle Armstrong, Moton H. Crockett, Jr., Denise Hutto & G. David Rauchlecorrected PAC names to include their PAC status (previously inadvertently omitted) for AFSCME PEOPLE & Carter & Burgess, Inc. Political Committeecorrected contributor previously reported as Austin Trust to Melissa A. Jones. The check listed							
7	AFFIDAVIT	Austin Trust Company with in from Ms. Jones, but written fi corrected expenditure name their known acronym.	rom her trust e of Capitol /	account. Area Progressiv	ve Democrats, po		as CAPD,	ected
	My Co	AN C. HARRY ublic, State of Texas mmission Expires ay 11, 2011	Chec I swe later that ti I swe	rt is true and k ONLY if ap ear, or affirm than the 14 he report as ar, or affirm,	d correct. pplicable: the thick that I am file the business originally files	ling this correct day after the d d is inaccurate or or or omission in	ed repor ate I lea or incomp	t not rned lete.
	Sworn to and subscrib	oed before me by	USan	Cole	this the <u>\f</u>	ate or Officeholder Aug of Aug Title of officer admi	CUST Notering oa	th
	Remem	ber To Attach Any Pa		-	=	Report Form	1	

P.O. Box 12070 FORM C/OH CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT COVER SHEET PG 1 1 ACCOUNT# 2 PAGE# The C/OH INSTRUCTION GUIDE explains how to complete this form. (Ethics Commission filers) 1 of 81 00000009 CANDIDATE / MS/MRS/MR FIRST OFFICE USE ONLY OFFICEHOLDER Sheryl NAME Date Received NICKNAME LAST SUFFIX Cole CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE OFFICEHOLDER 301 W. 2nd St. 2nd Floor Austin, TX 78701 MAILING **ADDRESS** Date Hand-delivered or Date Postmarked Change of Address Receipt # Amount MS / MRS / MR **CAMPAIGN** Date Processed Rev. Joseph TREASURER NAME Date Imaged SUFFIX NICKNAME STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY: STATE: ZIP CODE CAMPAIGN TREASURER 5918 Lookout Mountain Austin, TX 78731 **ADDRESS** (Residence or business) AREA CODE PHONE NUMBER EXTENSION CAMPAIGN TREASURER (512) 323-6605 PHONE 8 REPORT TYPE January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only) Final report (Attach C/OH - FR) July 15 8th day before election Exceeded \$500 limit Day Year Month Year 9 PERIOD Month Day THROUGH COVERED 01/01/2009 03/30/2009 ELECTION DATE 10 ELECTION **ELECTION TYPE** Year Month Day Primary Runoff X General Special 05/09/2009 OFFICE HELD (if any) City Council, Place 6 12 OFFICE SOUGHT (if known) City Council, Place 6 11 OFFICE 13 NOTICE Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. OF DIRECT Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. CAMPAIGN **EXPENDITURE** Name BY OTHER **INDIVIDUALS** Address/PO Box; Apt. / Suite #; City; State: Zip Code additional pages **GO TO PAGE 2**

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512)463-5800 1-800-325-8506 CANDIDATE / OFFICEHOLDER REPORT: FORM C/OH SUPPORT & TOTALS COVER SHEET PG 2 14 C/OH NAME Cole, Sheryl 15 ACCOUNT # (Ethics Commission filers) 00000009 .. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may 16 NOTICE have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this **FROM** information only if they receive notice of such expenditures. ... **POLITICAL** COMMITTEE NAME COMMITTEE TYPE COMMITTEE(S) GENERAL COMMITTEE ADDRESS SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME additional pages COMMITTEE CAMPAIGN TREASURER ADDRESS 17 CONTRIBUTION TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN \$ 2,313.00 **TOTALS** PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED TOTAL POLITICAL CONTRIBUTIONS 2. \$ 116,394.13 (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED **EXPENDITURE** 3. **TOTALS** 161.61 **TOTAL POLITICAL EXPENDITURES** 4. 35,705.00 CONTRIBUTION TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE 5. **BALANCE** 102,695.69 LAST DAY OF THE REPORTING PERIOD **OUTSTANDING** TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LOAN TOTALS LAST DAY OF THE REPORTING PERIOD 40,000.00 **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. SUSAN C. HARRY Notary Public, State of Texas My Commission Expires May 11, 2011 nature of Candidate or Officeholder AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said , to certify which, witness my hand and seal of office.

Print name of officer administering oath

Title of officer administering oath

The Instructi	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 1/1	71 Report: 3/81
2 FILER NAME	Cole, Sheryl		3 ACCOUNT# 00000009	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID# Adams, Mary Lou	<u> </u>	7 Amount of contribution (\$)	8
01/12/2009	6 Contributor address; City; State; Zip Code 7308 Valburn Dr. Austin, TX 78731		\$100.00	
			1	Texas, complete Schedule T)
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See In:	structions)	
Date	Full name of contributor	<u>'</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/12/2009	Contributor address; City; State; Zip Code 1625 L. St. N.W. Washington, DC 20036		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Delegated		Employer (See In:	<u>'</u>	Toxas, complete contents 1,
, Principal occul	pation / Job title (See Instructions)		structions)	
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
02/05/2009	Contributor address; City; State; Zip Code 7 Anderson Crossing Cedar Park, TX 78613		\$100.00	
				Texas, complete Schedule ?)
Principal occup	pation / Job title (See Instructions)	Employer (See Ins	structions)	
Date	Full name of contributor ☐ out-of-state PAC (ID# Alam, Jamil	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
02/02/2009	Contributor address; City; State; Zip Code 1401 Gaston Ave. Austin, TX 78703		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occur	pation / Job title (See Instructions)	Employer (See In:	structions)	
Principal		Endeavor	,	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/25/2009	Contributor address; City; State; Zip Code 10700 Lovridge Drive Austin, TX 78739		\$150.00	
			المارية الماري	Towns complete California in To
				Texas, complete Schedule T)
Principal occup	eation / Job title (See Instructions)	Employer (See Ins	structions)	

	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 2/	71 Report: 4/81		
2	FILER NAME	Cole, Sheryl		3 ACCOUNT# 00000009	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Ali-Osman, Francis)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	02/23/2009	6 Contributor address; City; State; Zip Code 11020 Huebner Oaks, #1231 San Antonio, TX 78230		\$100.00	 		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	02/25/2009	Contributor address; City; State; Zip Code 5025 Wisconsin Ave. N.W. Washington, DC 20016-4139		\$300.00	 		
		•		(if travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	<u> </u>		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	03/13/2009	Contributor address; City; State; Zip Code 5613 Palisades Court Austin, TX 78731		\$100.00	! ! !		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	<u> </u>			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	02/12/2009	Contributor address; City; State; Zip Code 1515 Oxford Ave. Austin, TX 78704		\$200.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Engineer	ation / Job title (See Instructions)	Employer (See In Black & Veatch	structions)			
	Date	Full name of contributor ☐ out-of-state PAC (ID# Anderson, Richard)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	03/24/2009	Contributor address; City; State; Zip Code 3600 N. Capital of Texas Highway Austin, TX 78746		\$350.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Partner	ation / Job title (See Instructions)	Employer (See In: HPI Real Estate	structions) & Investment Se	rvices, Inc.		

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	The Instruction	אס Guide explains how to complete this form.		1 PAGE # Schedule: 3/	71 Report: 5/81
2	FILER NAME	Cole, Sheryl		3 ACCOUNT# 00000009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Appenzeller, Keith)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
į	01/01/2009	6 Contributor address; City; State; Zip Code 1123 Ranch Road Tarpon Springs, FL 34688		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup President	ation / Job title (See Instructions)	10 Employer (See In King Engineerir		
	Date	Full name of contributor out-of-state PAC (ID# Armstrong, Mozelle)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	01/27/2009	Contributor address; City; State; Zip Code P.O. Box 5422 Austin, TX 78763-5422		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	•	ation / Job title (See Instructions)	Employer (See In	<u> </u>	
	business and	real estate investor	self		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	03/25/2009	Contributor address; City; State; Zip Code Associated Builders & Contractors PAC 3006 Longhorn Blvd. Ste 104 Austin, TX 78758		\$300.00	
<u> </u>	Driverical account	ction / Joh Site / Con Johnston	F	<u> </u>	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Ausley, Tom)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	01/08/2009	Contributor address; City; State; Zip Code 3707 Laurel Ledge Lane Austin, TX 78731		\$200.00	ł
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In Ausley, Algert, I	structions) Robertson & Flore	es, L.L.P.
	Date	Full name of contributor ut-of-state PAC (ID# Austin Assocation of Professional Firefighters PAC		Amount of contribution (\$)	In-kind contribution description (if applicable)
	03/10/2009	Contributor address; City; State; Zip Code 7537 Cameron Rd. Austin, TX 78752		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)	

The Instructi	ON GUIDE explains how to complete this form.		1 PAGE#	74. D			
2 FILER NAME	Cole, Sheryl		3 ACCOUNT#	71 Report: 6/81 (Ethics Commission filers)			
2 FILER NAME	Cole, Shelyi		00000009	(Ethics Commission meta)			
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID: Auten, Roland Swenson and Roseana	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
01/09/2009	6 Contributor address; City; State; Zip Code 1507 Yaupon Valley Rd. Austin, TX 78746		\$700.00	 			
			(if travel outside of	Texas, complete Schedule T)			
9 Principal occup Managing Di	pation / Job title (See Instructions) rector / Staff	10 Employer (See In SXSW / SXSW	structions)				
Date	Full name of contributor	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
02/21/2009	Contributor address; City; State; Zip Code 5705 Scout Island Cove Austin, TX 78731		\$350.00	 			
			(If travel outside of	Texas, complete Schedule T)			
Principal occup	pation / Job title (See Instructions)	Employer (See In Homemaker	structions)				
Date	Full name of contributor ☐ out-of-state PAC (ID# Baer and Etta Klinger, Therese	<u></u>	Amount of contribution (\$)	In-kind contribution description (if applicable)			
01/06/2009	Contributor address; City; State; Zip Code 5904 Mountainclimb Dr. No. 1 Austin, TX 78731		\$700.00	\ 			
			<u> </u>	Texas, complete Schedule T)			
Principal occup President / re	pation / Job title (See Instructions) stired	Employer (See In Baer Engineerir					
Date	Full name of contributor	<u>#</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
01/23/2009	Contributor address; City; State; Zip Code 4850 Plaza Dr. Irving, TX 75063		\$350.00	} 			
			(If travel outside of	Texas, complete Schedule T)			
Principal occur CEO	eation / Job title (See Instructions)	Employer (See In Smart Start	structions)				
Date	Full name of contributor ☐ out-of-state PAC (ID# Barker, Bobbie	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)			
01/25/2009	Contributor address; City; State; Zip Code 802 Terrace Mountain Dr. Austin, TX 78746		\$250.00	 			
			(If travel outside of	Texas, complete Schedule T)			
Principal occup Executive Dir	eation / Job title (See Instructions) ector	Employer (See In: St. David's Four					

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The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 5/7	71 Report: 7/81
2 FILER NAME	Cole, Sheryl		3 ACCOUNT# 00000009	(Ethics Commission filers)
4 Date	5 Full name of contributor	*)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
01/02/2009	6 Contributor address; City; State; Zip Code 204 East Milton St. Austin, TX 78704	• • • • • • • • • • • • • • • • • • • •	\$700.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occup attorney / atto	pation / Job title (See Instructions) princy	10 Employer (See In Armbrust & Bro	structions) wn, L.L.P. / State	of Texas
Date	Full name of contributor	<i>‡</i>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/12/2009	Contributor address; City; State; Zip Code 1115 San Jacinto Blvd., Ste. 275 Austin, TX 78701		\$700.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Consultant / I	nation / Job title (See Instructions) Homemaker	Employer (See In Self / none	structions)	
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
02/03/2009	Contributor address; City; State; Zip Code 1704 West 30th St. Austin, TX 78703		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occur	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/02/2009	Contributor address; City; State; Zip Code 11205 Limoncilo Ct. Austin, TX 78750		\$700.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup attorney / hor	pation / Job title (See Instructions) nemaker	Employer (See In: Armbrust & Bro	structions) wn, L.L.P. / none	
Date	Full name of contributor	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/27/2009	Contributor address; City; State; Zip Code 3411 Southill Circle Austin, TX 78703-1045		\$150.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)	

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厂	The Instruction	พ Guide explains how to complete this form.	Name of Control	1 PAGE#			
<u> </u>				Schedule: 6/	71 Report: 8/81		
2	FILER NAME	Cole, Sheryl		3 ACCOUNT#	(Ethics Commission filers)		
Ļ				00000009			
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Belton, Rudy	<u>(</u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	03/06/2009	6 Contributor address; City; State; Zip Code 505 East Huntland Dr., Ste. 530 Austin, TX 78752	•••••	\$350.00	1 ! !		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup real estate	ation / Job title (See Instructions)	10 Employer (See In: Belton Group	structions)			
	Date	Full name of contributor	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	01/27/2009	Contributor address; City; State; Zip Code 1104 Live Oak Ridge Rd. Austin, TX 78746		\$700.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup architect / Ad	ation / Job title (See Instructions) min	Employer (See In: Land Design Pa	structions) artners / Equiphon			
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	01/07/2009	Contributor address; City; State; Zip Code 1404 Foxtail Cove Austin, TX 78704		\$350.00	 		
1				(if travel outside of	Texas, complete Schedule T)		
	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See Ins Joel Bennett, P.				
	Date	Full name of contributor ut-of-state PAC (ID#	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	02/05/2009	Contributor address; City; State; Zip Code 601 Bulian Lane Austin, TX 78746		\$200.00	} } 		
	, ,			(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See Ins Requested	structions)			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	02/19/2009	Contributor address; City; State; Zip Code 4603 Island Cv. Austin, TX 78731		\$350.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Investor	ation / Job title (See Instructions)	Employer (See Ins Self	structions)			

The Instructi	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 7/	71 Report: 9/81
2 FILER NAME	Cole, Sheryl		3 ACCOUNT# 00000009	(Ethics Commission filers)
4 Date	5 Full name of contributor	*)	7 Amount of contribution (\$)	l 8 In-kind contribution description (if applicable)
01/02/2009	6 Contributor address; City; State; Zip Code 801 W. 5th St. Apt. 908 Austin, TX 78703		\$700.00	
			L	Texas, complete ochecase ()
9 Principal occup attorney / stu	pation / Job title (See Instructions) dent	10 Employer (See In Armbrust & Bro	structions) wn, L.L.P. / none	
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/27/2009	Contributor address; City; State; Zip Code 2605 Woodmont Avenue Austin, TX 78703		\$350.00	1 []
			(if travel outside of	Texas, complete Schedule T)
D-iil	-di/ lab title (See Instructions)	Employer (Con In		
Executive	pation / Job title (See Instructions)	Employer (See In Heritage Title C		
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/20/2009	Contributor address; City; State; Zip Code 13005 Shawnee Manchaca, TX 78652		\$350.00	
			<u> </u>	Texas, complete Schedule T)
Principal occup Legal Secret	pation / Job title (See Instructions) ary	Employer (See In Brown McCarro		
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/17/2009	Contributor address; City; State; Zip Code P O Box 200532 Austin, TX 78720		\$350.00	}
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
02/05/2009	Contributor address; City; State; Zip Code 5705 Burnet Rd. Austin, TX 78756	, , , , , , , , , , , , , , , ,	\$700.00	
			(lf tenual autaids -£	Texas, complete Schedule T)
<u> </u>			,	rexas, complete schedule ()
Principal occup Owner / Hous	pation / Job title (See Instructions) Sewife	Employer (See In: Home Lumber (

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	The Instruction	אס Guide explains how to complete this form.		1 PAGE#	74. Daniel 40/04		
2	FILER NAME	Cole, Sheryl		3 ACCOUNT # 00000009	71 Report: 10/81 (Ethics Commission filers)		
4	Date	5 Full name of contributor	‡)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	01/26/2009	6 Contributor address; City; State; Zip Code 5101 Buffalo Pass Austin, TX 78745		\$250.00	 		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Civil Enginee	ation / Job title (See Instructions) r	10 Employer (See In Jones & Carter	structions)			
	Date	Full name of contributor	<i>‡</i>)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	03/30/2009	Contributor address; City; State; Zip Code 5423 Shoalwood Avenue Austin, TX 78756		\$100.00	! !		
				(if travel outside of	Texas, complete Schedule T)		
	Principal occup	nation / Job title (See Instructions)	Employer (See In	structions)			
L							
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
:	02/14/2009	Contributor address; City; State; Zip Code 3115 Helms St. #307 Austin, TX 78705		\$125.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	01/09/2009	Contributor address; City; State; Zip Code 6405 Cascada Dr. Austin, TX 78750		\$350.00	 		
				(if travel outside of	Texas, complete Schedule T)		
		ation / Job title (See Instructions) n. Affairs Manager	Employer (See In 3M	structions)			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	02/26/2009	Contributor address; City; State; Zip Code 3900 Dry Ledge Cove Austin, TX 78731		\$700.00	 		
				(If travel outside of	Texas, complete Schedule T)		
		ation / Job title (See Instructions) Developer / Volunteer	Employer (See In Self / none	'	· —		

<u> </u>							
	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 9/	71 Report: 11/81		
2	FILER NAME	Cole, Sheryl		3 ACCOUNT # 00000009	(Ethics Commission filers)		
4	Date	5 Full name of contributor	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	02/24/2009	6 Contributor address; City; State; Zip Code 2228 Tarlton Cove Austin, TX 78746		\$100.00	 		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)			
	Date	Full name of contributor □ out-of-state PAC (IDa Brown, Frank & Janice	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	01/02/2009	Contributor address; City; State; Zip Code 602 Coquina Lane Austin, TX 78746		\$700.00	 		
	<u> </u>			l ' '	Texas, complete Schedule T)		
		eation / Job title (See Instructions) ege selection consultant	Employer (See In Armbrust & Bro				
	Date	Full name of contributor	<i>‡</i>)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	02/20/2009	Contributor address; City; State; Zip Code 8702 Bluecreek Cove Austin, TX 78735-1431		\$200.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	eation / Job title (See Instructions)	Employer (See In	<u> L.`</u>			
	attorney			Campbell & Schwa	artz, L.L.P.		
	Date	Full name of contributor	!)	Amount of contribution (\$)	in-kind contribution description (if applicable)		
	01/29/2009	Contributor address; City; State; Zip Code 140 Birnam Wood Ct Austin, TX 78746		\$350.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Physician	ation / Job title (See Instructions)	Employer (See In Self	structions)			
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	01/27/2009	Contributor address; City; State; Zip Code 3345 Bee Caves Road Suite 200 Austin, TX 78746		\$700.00	 		
	İ			(If traval autoida of	Texas, complete Schedule T)		
	Principal occur	ation / Job title (See Instructions)	Employer (See In	<u> </u>	Toxas, complete schodule ()		
	President / ho		Bury & Partners				

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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 10	0/71 Report: 12/81	
2	FILER NAME	Cole, Sheryl		3 ACCOUNT # 00000009	(Ethics Commission filers)	
4	Date	5 Full name of contributor ut-of-state PAC (ID#Bush, Peter	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	01/06/2009	6 Contributor address; City; State; Zip Code 1797 Sandy Creek Rd. Red Rock, TX 78662		\$100.00	 	
				(If travel outside of	Texas, complete Schedule T)	
9	Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)		
	Date	Full name of contributor	()	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	02/03/2009	Contributor address; City; State; Zip Code 1708 Tracy Miller Cedar Park, TX 78613		\$100.00	 	
		Coddit and 177 roots		(If travel outside of	Texas, complete Schedule T)	
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)	•	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	01/02/2009	Contributor address; City; State; Zip Code 2103 Schulle Avenue Austin, TX 78703		\$700.00	 	
L.				(If travel outside of	Texas, complete Schedule T)	
	Principal occup attorney / hor	nation / Job title (See Instructions) nemaker	Employer (See In Armbrust & Bro	structions) wn, L.L.P. / none		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	02/02/2009	Contributor address; City; State; Zip Code 98 San Jacinto Blvd. Austin, TX 78701		\$350.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup attorney	ation / Job title (See Instructions)	Employer (See In Fritz, Byrne, He	structions) ad & Harrison, L.	L.P.	
	Date	Full name of contributor Dout-of-state PAC (ID# Caballero, Suzanna)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	03/07/2009	Contributor address; City; State; Zip Code 1805 Cresthaven Dr. Austin, TX 78704-2752		\$100.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		

The Instru	CTION GUIDE explains how to complete this form.	-11	1 PAGE# Schedule: 11	/71 Report: 13/81
2 FILER NAM	ME Cole, Sheryl		3 ACCOUNT # 00000009	(Ethics Commission filers)
4 Date	5 Full name of contributor	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
02/25/200	9 6 Contributor address; City; State; Zip Code 2604 La Ronde St. Austin, TX 78731		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal oc	cupation / Job title (See Instructions)	10 Employer (See In	nstructions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/02/200	9 Contributor address; City; State; Zip Code 4162 Travis Circle Austin, TX 78703		\$700.00	!
			(If travel outside of	Texas, complete Schedule T)
	cupation / Job title (See Instructions) comemaker	Employer (See In Armbrust & Bro	estructions) own, L.L.P. / none	_
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
02/13/200	9 Contributor address; City; State; Zip Code PO Box 5352 Austin, TX 78763		\$100.00	
			<u> </u>	Texas, complete Schedule T)
Principal oc	cupation / Job title (See Instructions)	Employer (See In	estructions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/19/200	9 Contributor address; City; State; Zip Code 2405 Riddle Rd. Austin, TX 78748		\$350.00	
			(if travel outside of	Texas, complete Schedule T)
Principal oc Owner	cupation / Job title (See Instructions)	Employer (See In MPI- Materials	structions) Products Internation	onal, Ltd.
Date	Full name of contributor	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/27/200	9 Contributor address; City; State; Zip Code 290 Middle Creek Buda, TX 78761		\$350.00	1
			(If travel outside of	Texas, complete Schedule T)
Principal oc	cupation / Job title (See Instructions)	Employer (See In	l	_
		Requested		

				
The Inst	RUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 12	/71 Report: 14/81
2 FILER NA	ME Cole, Sheryl		3 ACCOUNT # 00000009	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID: Carroll, Laura & John	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
03/20/20	6 Contributor address; City; State; Zip Code 206 Fletcher St Austin, TX 78704	•••••	\$150.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal	occupation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/30/20	Contributor address; City; State; Zip Code 1701 Fall Creek Dr. Cedar Park, TX 78613		\$700.00	t
			(If travel outside of	Texas, complete Schedule T)
Principal (occupation / Job title (See Instructions)	Employer (See In	structions)	-
	t & General Manager / CEO	SuperShuttle / 0	Carter Transportat	ion Services
			1	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
02/10/20	Contributor address; City; State; Zip Code P.O. Box 901058 Fort Worth, TX 76101		\$350.00	
			(If travel outside of	Texas, complete Schedule 7)
Principal	occupation / Job title (See Instructions)	Employer (See in Carter & Burges		
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/06/20	Contributor address; City; State; Zip Code 3805-A Petes Path Austin, TX 78731		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal o	occupation / Job title (See Instructions)	Employer (See In:	structions)	
Date	Full name of contributor ut-of-state PAC (ID# Chan, Grace and Raymond	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/06/20	Contributor address; City; State; Zip Code 1605 Churchwood Cove Austin, TX 78746		\$700.00	
			(If tenual autaida af:	Texas, complete Schedula T)
Delanination	properties / Joh title (Con Instructions)	Employee (0 = c fee		ravas' combiata scuadria () 🔲
	occupation / Job title (See Instructions) / Finance Manager	Employer (See Ins Raymond Chan		ond Chan & Assoc.

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 13	3/71 Report: 15/81		
2	FILER NAME	Cole, Sheryl		3 ACCOUNT# 00000009	(Ethics Commission filers)		
4	Date	5 Full name of contributor	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	02/02/2009	6 Contributor address; City; State; Zip Code 10100 Crinium Cove Austin, TX 78759		\$100.00	 - -		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)			
	Date	Full name of contributor	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	02/02/2009	Contributor address; City; State; Zip Code 1915 Wells Branch Pkwy, #1614 Austin, TX 78728		\$300.00	 		
				'	Texas, complete Schedule T)		
	Principal occup taxi driver	pation / Job title (See Instructions)	Employer (See In Lone Star Cab	structions)			
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	01/13/2009	Contributor address; City; State; Zip Code 7905 Moritz Lane Austin, TX 78731-1472		\$100.00	 		
				(If tenuel autoide of	Texas, complete Schedule T)		
<u> </u>	B to to to		F	<u> </u>	Texas, complete Schedule 1)		
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	01/27/2009	Contributor address; City; State; Zip Code 1904 Larchmont Dr. Austin, TX 78704		\$350.00	1 		
-				(if travel outside of	Texas, complete Schedule T)		
	Principal occup Associate Atte	ation / Job title (See Instructions) orney	Employer (See In Wills & Estate L				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	03/17/2009	Contributor address; City; State; Zip Code 7903 Bracken Court Austin, TX 78731		\$100.00	 		
				//same and a section of	T		
<u> </u>	Dela el- el	otion / Joh title (Pag Instructions)	Emplaces (Oct.)		Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	suuciions)			

The Instructi	ION GUIDE explains how to complete this form.		1 PAGE # Schedule: 14	4/71 Report: 16/81
2 FILER NAME	Cole, Sheryl		3 ACCOUNT # 00000009	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID# Clark, Ellen	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
01/03/2009	6 Contributor address; City; State; Zip Code 2838 Montebello Rd. Austin, TX 78746		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
g Principal occup	pation / Job title (See Instructions)	10 Employer (See In None	structions)	
Date	Full name of contributor ut-of-state PAC (ID# Clark, Stephen & Joan)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/03/2009	Contributor address; City; State; Zip Code 4210 River Garden Trail Austin, TX 78746		\$700.00	
			l '	Texas, complete Schedule T)
	pation / Job title (See Instructions) Investment / homemaker	Employer (See In Cypress Real E	structions) state / none	
Date	Full name of contributor ut-of-state PAC (ID# Clark, Timothy & Antoinette	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/03/2009	Contributor address; City; State; Zip Code 2200 Far Gallant Dr. Austin, TX 78746		\$700.00	1
			<u> </u>	Texas, complete Schedule T)
	pation / Job title (See Instructions) Investment / homemaker	Employer (See In Cypress Real E		
Date	Full name of contributor out-of-state PAC (ID# Clark & Clark Attorneys at Law	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/22/2009	Contributor address; City; State; Zip Code 3624 North Hills Dr., #205A Austin, TX 78731		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In:	structions)	
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable) event expenses
02/16/2009	Contributor address; City; State; Zip Code PO Box 1148 Austin, TX 78767		\$115.00	i [
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In:	structions)	
	,			I

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.	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE#	i/71 Report: 17/81
2	FILER NAME	Cole, Sheryl		3 ACCOUNT # 00000009	(Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (ID# Cobb Fendley PAC	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	01/21/2009	6 Contributor address; City; State; Zip Code 13430 Northwest Freeway, Ste. 1100 Houston, TX 77040		\$250.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	01/22/2009	Contributor address; City; State; Zip Code 6711 Winterberry Dr. Austin, TX 78750-8300		\$250.00	!
			·	<u>. </u>	Texas, complete Schedule T)
	Principal occup President	pation / Job title (See Instructions)	Employer (See In Chiang, Patel &		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	03/27/2009	Contributor address; City; State; Zip Code 4119 Cactus Oaks Rd. San Antonio, TX 78251		\$700.00	
			<u> </u>	1	Texas, complete Schedule T)
		pation / Job title (See Instructions) gement Analyst / retired	Employer (See In US Air Force / r		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	02/20/2009	Contributor address; City; State; Zip Code 3735 S. Highway A1A Melbourne Beach, FL 32951		\$700.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Engineer	ation / Job title (See Instructions)	Employer (See In: MWH	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	02/05/2009	Contributor address; City; State; Zip Code 3808 Hillbrook Dr. Austin, TX 78731		\$200.00	
		ı		(if travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:		
	real estate		Centro Partners	i, LLC	

	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 16	5/71 Report: 18/81		
2	FILER NAME	Cole, Sheryl		3 ACCOUNT# 00000009	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Collins, Patrick & Sharlene	‡)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	01/02/2009	6 Contributor address; City; State; Zip Code 1400 Yaupon Valley Rd. Austin, TX 78746		\$700.00	[
}				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup none / Attorno	ation / Job title (See Instructions) ey	10 Employer (See In Retired / Armbri				
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	01/19/2009	Contributor address; City; State; Zip Code 2601 Great Oaks Pkwy. Austin, TX 78756		\$100.00	 		
		·		(If travel outside of	Texas, complete Schedule T)		
<u> </u>	Principal occup	eation / Job title (See Instructions)	Employer (See In	<u>l </u>	Toxas, complete contests 1,		
	•	, , , , , , , , , , , , , , , , , , ,		•			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	01/27/2009	Contributor address; City; State; Zip Code	• • • • • • • • • • • • • • • • • • • •	\$600.00	 		
		Georgetown, TX 78633		(If travel outside of	Texas, complete Schedule T)		
	Principal occup President / re	ation / Job title (See Instructions) tired	Employer (See In: Yellow Cab / no				
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	01/30/2009	Contributor address; City; State; Zip Code 1910 Breman Austin, TX 78703		\$350.00	 		
				(if travel outside of	Texas, complete Schedule T)		
	Principal occup Title Insuranc	ation / Job title (See Instructions) e	Employer (See In: Heritage Title	structions)			
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	01/01/2009	Contributor address; City; State; Zip Code 2132 Fardown Holladay, UT 84121		\$350.00	1 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup advertising	ation / Job title (See Instructions)	Employer (See In: Reagan Adverti:	structions)			

	The INSTRUCTION	ON GUIDE explains how to complete this form.		1 PAGE#		
_					7/71 Report: 19/81	
2	FILER NAME	Cole, Sheryl		3 ACCOUNT# 00000009	(Ethics Commission filers)	
4	Date	5 Full name of contributor ut-of-state PAC (ID# Cotton, Jim	t)	7 Amount of contribution (\$)	In-kind contribution description (if applicable)	
	03/27/2009	6 Contributor address; City; State; Zip Code 11000 Spicewood Pkwy. Austin, TX 78750-3404		\$200.00	 	
				<u> </u>	f Texas, complete Schedule T)	
9	Principal occup real estate bro	pation / Job title (See Instructions) oker	10 Employer (See Ins McAllister & Ass			
	Date	Full name of contributor	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	02/28/2009	Contributor address; City; State; Zip Code P.O. Box 2066 Austin, TX 78768-2066		\$100.00	 	
				(If travel outside of	f Texas, complete Schedule T)	
	Principal occup Investor	pation / Job title (See Instructions)	Employer (See Ins Self	structions)		
	Date	Full name of contributor	£)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	03/17/2009	Contributor address; City; State; Zip Code P.O. Box 2066 Austin, TX 78768-2066		\$100.00	 	
				(If travel outside of	f Texas, complete Schedule T)	
	Principal occup Investor	eation / Job title (See Instructions)	Employer (See Ins Self	structions)		
	Date	Full name of contributor	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	03/17/2009	Contributor address; City; State; Zip Code P.O. Box 2066 Austin, TX 78768-2066		\$150.00	! ! !	
		ı		(If travel outside of	f Texas, complete Schedule T)	
	Principal occupa	ation / Job title (See Instructions)	Employer (See Ins Self	structions)		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	03/12/2009	Contributor address; City; State; Zip Code 5902 Lonesome Valley Trail Austin, TX 78731		\$150.00	 	
		I		(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)		

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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 18	3/71 Report: 20/81		
2	FILER NAME	Cole, Sheryl		3 ACCOUNT # 00000009	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID: Cummings, Bruce	<u> </u>	7 Amount of contribution (\$)	8		
	01/25/2009	6 Contributor address; City; State; Zip Code 2306 Masonwood Way Round Rock, TX 78681		\$100.00	 		
<u> </u>				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)			
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	02/02/2009	Contributor address; City; State; Zip Code 4208 Rose Ave Western Springs, IL 60558	• • • • • • • • • • • • • • • • • • • •	\$100.00	{ { !		
				ļ `	Texas, complete Schedule T)		
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	03/02/2009	Contributor address; City; State; Zip Code 1403 Club Ridge Cv. Austin, TX 78735-1623		\$100.00	 		
	Dringing Lagran	otion / Joh title /Coe Instructions)	Employer (Con In	1 '	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
i	Date	Full name of contributor ut-of-state PAC (ID)	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	02/23/2009	Contributor address; City; State; Zip Code 8108 Red Willow Dr. Austin, TX 78736		\$100.00	1 1		
	:			(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor ut-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	03/03/2009	Contributor address; City; State; Zip Code 9702 Swansons Ranch Rd. Austin, TX 78748		\$100.00	! 		
					' _		
	Principal occur	ation / Job title (See Instructions)	Employer (See In:	<u> </u>	Texas, complete Schedule T)		
	- пнарагоссир	80011 300 tue (366 ilistructions)	Embloket (See it:	au uonona)			

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	The Instruction	N GUIDE explains how to complete this form.		1 PAGE # Schedule: 19	9/71 Report: 21/81
2	FILER NAME	Cole, Sheryl		3 ACCOUNT # 00000009	(Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (ID#	:)	7 Amount of contribution (\$)	8 In-kind contribution description (If applicable)
	01/27/2009	6 Contributor address; City; State; Zip Code 1517 Northwood Austin, TX 78703		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup attorney	eation / Job title (See Instructions)	10 Employer (See In Scott, Douglass	structions) s & McConnico, L.	L.P.
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable) Event Expense
	02/20/2009	Contributor address; City; State; Zip Code 700 Lavaca St., Ste. 1300 Austin, TX 78701		\$91.13	
		·		(If travel outside of	Texas, complete Schedule T)
-	Principal occup	ation / Job title (See Instructions)	Employer (See In	1	Toxag, complete concease ()
		,		•	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	02/02/2009	Contributor address; City; State; Zip Code 4410 Twisted Tree Dr. Austin, TX 78735		\$700.00	
				(If travel outside of	Texas, complete Schedule T)
		ation / Job title (See Instructions) pager / Teacher	Employer (See In Klotz Associate		
	Date	Full name of contributor ut-of-state PAC (ID# Durst, Philip)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	02/28/2009	Contributor address; City; State; Zip Code 4101 Avenue C. Austin, TX 78751		\$150.00	1 ! !
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor uut-of-state PAC (ID# Earvin, Larry)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	02/05/2009	Contributor address; City; State; Zip Code 10837 Olympia Fields Loop Austin, TX 78747		\$100.00	1
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)	

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The Instruct	ION GUIDE explains how to complete this form.		1 PAGE# Schedule: 20	1/71 Report: 22/81		
2 FILER NAME	Cole, Sheryl		3 ACCOUNT # 00000009	(Ethics Commission filers)		
4 Date	5 Full name of contributor ut-of-state PAC (ID: Elliott, Christopher	¥)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
01/07/2009	6 Contributor address; City; State; Zip Code 1705 Rabb Road Austin, TX 78704		\$350.00	 		
	}		(If travel outside of	Texas, complete Schedule T)		
9 Principal occu attorney	pation / Job title (See Instructions)	10 Employer (See In Graves Doughe	structions) rty Hearon & Moc	ody		
Date	Full name of contributor	/)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
01/27/2009	Contributor address; City; State; Zip Code 2913 Trailview Mesa Terrace Austin, TX 78746	:	\$200.00	 		
			1	Texas, complete Schedule T)		
Principal occu Partner	pation / Job title (See Instructions)	Employer (See In Smith, Robertso	structions) on, Elliott & Glenn			
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
01/08/2009	Contributor address; City; State; Zip Code 3005 Sparkling Brook Lane Austin, TX 78746	i	\$700.00	 		
			(If travel outside of	Texas, complete Schedule T)		
Principal occu Principal / ho	pation / Job title (See Instructions) omemaker	Employer (See In: Endeavor / none	•			
Date	Full name of contributor ut-of-state PAC (ID# English, Patricia	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
03/05/2009	Contributor address; City; State; Zip Code 901 South Mopac Barton Oaks II, Ste. 200 Austin, TX 78746		\$350.00	 		
			(If travel outside of	Texas, complete Schedule T)		
Principal occu attorney	pation / Job title (See Instructions)	Employer (See In Noelke, English	structions) & Prescott, L.L.P			
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
01/12/2009	Contributor address; City; State; Zip Code 807 Brazos St. No 402 Austin, TX 78701		\$350.00	1 		
			(If travel outside of	Texas, complete Schedule T)		
Principal occu Attorney	pation / Job title (See Instructions)	Employer (See In: Erben & Yarbro				

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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 21	/71 Report: 23/81	
2	FILER NAME	Cole, Sheryl		3 ACCOUNT# 00000009	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Espinoza, Mario	;)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	03/30/2009	6 Contributor address; City; State; Zip Code 5007 W. Frances Pl. Austin, TX 78731		\$350.00	1 	
				(if travel outside of	Texas, complete Schedule T)	
9	Principal occup Deputy Exec	pation / Job title (See Instructions) utive Director	10 Employer (See In CTRMA	structions)		
	Date	Full name of contributor □ out-of-state PAC (ID#Fadel, Med)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	02/20/2009	Contributor address; City; State; Zip Code 3611 Doe Trail Austin, TX 78746		\$100.00	 	
		Addition, TX FOF40		(lé tanual autaide et	Texas, complete Schedule T)	
-	Principal occur	pation / Job title (See Instructions)	Employer (See In	L. *.	Texas, complete achedule 1)	
		,				
	Date	Full name of contributor □ out-of-state PAC (ID# Falkenberg, Howard	<u>'</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	01/07/2009	Contributor address; City; State; Zip Code P.O. Box 123 Austin, TX 78767		\$350.00	 	
				(if travel outside of	Texas, complete Schedule T)	
	Principal occup Business Exe	vation / Job title (See Instructions) scutive	Employer (See In Staats Falkenbe	structions) erg & Partners, Inc	c.	
	Date	Full name of contributor	()	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	02/18/2009	Contributor address; City; State; Zip Code 615 E. Wonsley Dr. #244 Austin, TX 78753		\$200.00	 	
L		-26.51		(If travel outside of	Texas, complete Schedule T)	
	Principal occup Self	ation / Job title (See Instructions)	Employer (See In Self	structions)		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable) Event Expense	
	01/27/2009	Contributor address; City; State; Zip Code 309 Lake Cliff Trail Austin, TX 78746		\$110.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup President	ation / Job title (See Instructions)	Employer (See In Heritage Title C	structions) ompany of Austin		

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The Instruct	ION GUIDE explains how to complete this form.		1 PAGE # Schedule: 22	/71 Report: 24/81		
2 FILER NAME	Cole, Sheryl		3 ACCOUNT # 00000009	(Ethics Commission filers)		
4 Date	5 Full name of contributor ut-of-state PAC (ID) Farmer, Gary	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
01/27/2009	6 Contributor address; City; State; Zip Code 309 Lake Cliff Trail Austin, TX 78746		\$240.00	\ \ \		
			(if travel outside of	Texas, complete Schedule T)		
9 Principal occu President	pation / Job title (See Instructions)	10 Employer (See In Heritage Title C	structions) ompany of Austin			
Date	Full name of contributor	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
01/27/2009	Contributor address; City; State; Zip Code 309 Lake Cliff Trail Austin, TX 78746		\$350.00) 		
	7,40,611, 1,7,7,7,40			, 		
Dala da al acces				Texas, complete Schedule T)		
homemaker	pation / Job title (See Instructions)	Employer (See In none	structions)			
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
01/19/2009	Contributor address; City; State; Zip Code P.O. Box 585 Austin, TX 78767		\$350.00	 		
				Texas, complete Schedule T)		
Principal occu retired	pation / Job title (See Instructions)	Employer (See In:	structions)			
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
01/09/2009	Contributor address; City; State; Zip Code 703 East 50th St. No. B Austin, TX 78751		\$350.00	 		
			(if travel outside of	Texas, complete Schedule T)		
Principal occu Event Direct	pation / Job title (See Instructions) or	Employer (See In: SXSW	structions)			
Date	Full name of contributor	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
02/04/2009	Contributor address; City; State; Zip Code 414 Ridgewood Rd. Austin, TX 78746	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$100.00			
			(if travel outside of	Texas, complete Schedule T)		
Principal occu	pation / Job title (See Instructions)	Employer (See Ins		. oxes, complete contente 1/		
		= 6 -> (,			

	The instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 23	/71 Report: 25/81	
2	FILER NAME	Cole, Sheryl		3 ACCOUNT# 00000009	(Ethics Commission filers)	
4	Date	5 Full name of contributor ut-of-state PAC (ID: French, Dorian	;)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	01/06/2009	6 Contributor address; City; State; Zip Code 4104 River Place Blvd. Austin, TX 78730		\$350.00	 	
				(If travel outside of	Texas, complete Schedule T)	
9	Principal occup Engineer	ation / Job title (See Instructions)	10 Employer (See In Brown & Gay E			
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	02/02/2009	Contributor address; City; State; Zip Code 5504 Woodview Austin, TX 78756		\$100.00] -	
		Adding 1X 70700		(If travel outside of	Texas, complete Schedule T)	
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)		
	·	,		·		
	Date	Full name of contributor	/	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	02/02/2009	Contributor address; City; State; Zip Code 3213 Catcay Corpus Christi, TX 78418	• • • • • • • • • • • • • • • • • • • •	\$350.00		
		Colpus Cillisti, 17 70410		(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	L_'	rexas, compare conseque 17	
	City Manager		City of Austin	su deuons)		
İ	Date	Full name of contributor ut-of-state PAC (ID# Gadzinski, Norman & Pamela	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	01/23/2009	Contributor address; City; State; Zip Code 259 Glenshire Lane Medina, OH 44256		\$700.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup Engineer / Ho	ation / Job title (See Instructions) susewife	Employer (See In: MWH / None	structions)		
	Date	Full name of contributor ut-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	03/09/2009	Contributor address; City; State; Zip Code 411 Brazos St., Ste. 99 Austin, TX 78701		\$100.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See Ins		· —	
	,	•		·	}	

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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 24	1/71 Report: 26/81	
2	FILER NAME	Cole, Sheryl		3 ACCOUNT# 00000009	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Getter, Kerry and Becky	‡)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	01/19/2009	6 Contributor address; City; State; Zip Code 1101 East 11th St. Austin, TX 78702		\$500.00	 	
				(If travel outside of	Texas, complete Schedule T)	
9	Principal occup CEO / homen	pation / Job title (See Instructions) naker	10 Employer (See In Balcones Reso	structions) urces, Inc. / none		
	Date	Full name of contributor ut-of-state PAC (ID# Giamboi, Thomas	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	01/23/2009	Contributor address; City; State; Zip Code 3312 Bryker Dr. Austin, TX 78703		\$100.00	! !	
				(If travel outside of	Texas, complete Schedule T)	
_	Principal occup	nation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	02/25/2009	Contributor address; City; State; Zip Code 3521 Starline Dr. Austin, TX 78759-8941		\$200.00	 	
_				<u> </u>	Texas, complete Schedule T)	
_	Principal occup retired	eation / Job title (See Instructions)	Employer (See In: retired	structions)		
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	01/04/2009	Contributor address; City; State; Zip Code 9403 Longvale Austin, TX 78729		\$150.00	 	
				Mean of state of	I	
┝	Principal occup	eation / Job title (See Instructions)	Employer (See In:	<u> </u>	Texas, complete Schedule T)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
[01/01/2009	Contributor address; City; State; Zip Code 3302 Enfield Austin, TX 78703		\$350.00	 	
				(If travel outside of	Texas, complete Schedule T)	
 		ation / Job title (See Instructions)	Employer (See Ins	structions)	· , , , , , , , , , , , , , , , , , , ,	
	Engineer		King Engineerin	9		

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Γ	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE#	
<u> </u>				Schedule: 25	5/71 Report: 27/81
2	FILER NAME	Cole, Sheryl		3 ACCOUNT# 00000009	(Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (ID#	<u> </u>	7 Amount of	8 In-kind contribution
	Date	Green, Rudolph	//	contribution (\$)	description (if applicable)
	03/10/2009	6 Contributor address; City; State; Zip Code 2801 Stratford Dr. Austin, TX 78746-4626		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor ut-of-state PAC (ID#	()	Amount of contribution (\$)	In-kind contribution description (if applicable)
⟨		Griffin, Rev. Marvin		(4)	doon paon (in application)
	01/15/2009	Contributor address; City; State; Zip Code 2632 Barton Hills Dr. Austin, TX 78704		\$100.00	
}				(If traval outside of	Texas, complete Schedule T)
┝	Principal occur	pation / Job title (See Instructions)	Employer (See In	1	Toxas, complete ocheane ()
	· morpar oddap				
	Date	Full name of contributor ut-of-state PAC (ID# Grissom, Joene	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	03/05/2009	Contributor address; City; State; Zip Code 6603 Shadow Valley Drive Austin, TX 78731		\$100.00	
{		radall, 17770101			
╙				1	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor ut-of-state PAC (ID#)	Amount of	In-kind contribution
		Grulke, Kristen Brock & Brent		contribution (\$)	description (if applicable)
	01/11/2009	Contributor address; City; State; Zip Code 2711 Tether Trl Austin, TX 78704-4642		\$700.00	I
				(If travel outside of	Texas, complete Schedule T)
\vdash	Principal occup	ation / Job title (See Instructions)	Employer (See In	I <u>`</u>	
		ctor / Housewife	SXSW / none		
	Date	Full name of contributor	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	02/03/2009	Contributor address; City; State; Zip Code 908 Castle ridge Road Austin, TX 78746		\$100.00	1 [
}				(If travel outside of	Texas, complete Schedule T)
_	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	

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The Instruction Guide explains how to complete this form.				1 PAGE#	/71 Report: 28/81
2	FILER NAME	Cole, Sheryl		3 ACCOUNT # 00000009	(Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (ID#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	01/22/2009	6 Contributor address; City; State; Zip Code PO BOX 140045 Austin, TX 78714		\$700.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup consulting / H	pation / Job title (See Instructions) lousewife	10 Employer (See In self / none	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	01/26/2009	Contributor address; City; State; Zip Code P.O. Box 163164 Austin, TX 78716		\$350.00	
		, radiii, rationio		(If travel outside of	I Texas, complete Schedule T)
	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In Ford & Ferraro	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
•	02/26/2009	Contributor address; City; State; Zip Code 8204 Brettonwoods Lane Austin, TX 78753		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor ut-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	03/27/2009	Contributor address; City; State; Zip Code 919 Congress Ave., Ste. 1130 Austin, TX 78701		\$200.00) [
				(If travel outside of	Texas, complete Schedule T)
	Principal occup attorney	ation / Job title (See Instructions)	Employer (See In HRWK	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Halff Associates State PAC)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	01/29/2009	Contributor address; City; State; Zip Code 1201 North Bowser Rd. Richardson, TX 75081		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)	

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE#	· · · · ·	
L					7/71 Report: 29/81	
2	FILER NAME	Cole, Sheryl		3 ACCOUNT# 00000009	(Ethics Commission filers)	
4	Date	5 Full name of contributor ut-of-state PAC (ID#	, 	7 Amount of	8 In-kind contribution	
-	Date	Hanna, Samir	·	contribution (\$)	description (if applicable)	
	02/19/2009	6 Contributor address; City; State; Zip Code 9528 Big View Dr. Austin, TX 78730		\$150.00	 	
	· · · · · · · · · · · · · · · · · · ·			(If travel outside of	Texas, complete Schedule T)	
9	Principal occup	pation / Job title (See Instructions)	10 Employer (See In	<u> </u>		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	03/12/2009	Contributor address; City; State; Zip Code P.O. Box 5628 Austin, TX 78763		\$100.00	! !	
		7.dd.iii, 17.10700		(If travel outside of	Texas, complete Schedule T)	
_	Principal occup	eation / Job title (See Instructions)	Employer (See In	<u> </u>		
	Date	Full name of contributor	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	01/06/2009	Contributor address; City; State; Zip Code 5333 Tortuga Tr. Austin, TX 78731-4545		\$350.00	 	
		7.000m, 17.70101 4040		(If traval autaida of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	<u> </u>	Texas, complete schedule +/	
	CFO	,	Butler Family In			
	Date	Full name of contributor)	Amount of	In-kind contribution	
	.	Harutunian, Anne & Takoohy		contribution (\$)	description (if applicable)	
	02/20/2009	Contributor address; City; State; Zip Code		\$600.00	! 	
		P.O. Box W Austin, TX 78713			I	
		_		(If travel outside of	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Engineer / Engineer		Employer (See In: Harutunian Eng	structions) ineering / Harutur	nian Engineering		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	01/06/2009	Contributor address; City; State; Zip Code 5805 Carry Back Lane Austin, TX 78746		\$700.00	 	
		700001, 17 10170				
	Dringinal occurs	ation / Job title (See Instructions)	Employer (See Ins		Texas, complete Schedule T)	
	attorney / hon			wn, L.L.P. / none		

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 28	3/71 Report: 30/81
2 FILER NAME	Cole, Sheryl		3 ACCOUNT# 00000009	(Ethics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Hayes, Spencer	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
01/26/2009	6 Contributor address; City; State; Zip Code 5820 Via Drive Austin, TX 78735	,	\$350.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occup Co-Founder	pation / Job title (See Instructions)	10 Employer (See Ins Oxford Commer		
Date	Full name of contributor	}	Amount of contribution (\$)	In-kind contribution description (if applicable)
02/28/2009	Contributor address; City; State; Zip Code 1613 Garnaas Dr. Austin, TX 78758		\$350.00	!
	Austin, 17,70,00		ris success outside of	Texas, complete Schedule T)
Principal occur	pation / Job title (See Instructions)	Employer (See In:	<u> </u>	Texas, complete Schedule 1)
business owr	•	Haynes-Eaglin-		
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/26/2009	Contributor address; City; State; Zip Code 3702 Eastledge Dr. Austin, TX 78731		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See Ins	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/24/2009	Contributor address; City; State; Zip Code 1609 Preston Ave. Austin, TX 78703		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup real estate	ation / Job title (See Instructions)	Employer (See Ins Capitol Market	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/25/2009	Contributor address; City; State; Zip Code 1400 Circle Ridge Drive Austin, TX 78746-3404		\$300.00	
			,	Texas, complete Schedule T)
Principal occup Senior Vice P	pation / Job title (See Instructions)	Employer (See Ins Cousins Propert		
Senior vice r	resident	Cousins Propert	1100	

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The Instruct	ON GUIDE explains how to complete this form.	1 PAGE# Schedule: 29	/71 Report: 31/81	
2 FILER NAME	Cole, Sheryl		3 ACCOUNT# 00000009	(Ethics Commission filers)
4 Date	5 Full name of contributor	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
02/04/2009	6 Contributor address; City; State; Zip Code 2208 Real Catorce Austin, TX 78746-7390	•••••	\$200.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occu Architectural	pation / Job title (See Instructions) Design	10 Employer (See In D.R. Horton	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
02/18/2009	Contributor address; City; State; Zip Code 1801 Lavaca, Unit 12C Austin, TX 78701	• • • • • • • • • • • • • • • • • • • •	\$100.00	
				Yawan aamalata Sabadula Ti
Principal occu	pation / Job title (See Instructions)	Employer (See In	1 '	Texas, complete Schedule T)
T Tillopal ood	pariotry des and (ede mondere)	Employor (Odd III		
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
02/24/2009	Contributor address; City; State; Zip Code 2303 Windsor Rd. Austin, TX 78703		\$350.00	}
	Pasini, 177700		(If travel outside of	Texas, complete Schedule T)
Principal occu Homemaker	pation / Job title (See Instructions)	Employer (See In Homemaker	structions)	
Date	Full name of contributor	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/25/2009	Contributor address; City; State; Zip Code 2303 Windsor Rd Austin, TX 78703-3116		\$350.00	}
			(If travel outside of	Texas, complete Schedule T)
Principal occu Partner	pation / Job title (See Instructions)	Employer (See In Hill Partners	structions)	
Date	Full name of contributor	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/02/2009	Contributor address; City; State; Zip Code 3700 Hillbrook Drive		\$700.00	
	Austin, TX 78731		(if travel outside of	Texas, complete Schedule T)
Principal occur	pation / Job title (See Instructions)	Employer (See In	structions)	
attorney / att		Armbrust & Bro	wn, L.L.P. / Vinso	n & Elkins LP

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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 30	D/71 Report: 32/81
2	FILER NAME	Cole, Sheryl		3 ACCOUNT# 00000009	(Ethics Commission filers)
4	Date	5 Full name of contributor	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	01/02/2009	6 Contributor address; City; State; Zip Code 504 Furlong Dr. Austin, TX 78746		\$700.00	
				<u> </u>	Texas, complete Schedule T)
9	Principal occup attorney / reta	pation / Job title (See Instructions) ail jeweler	10 Employer (See In: Armbrust & Bro		
	Date	Full name of contributor	<i>‡</i>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	01/26/2009	Contributor address; City; State; Zip Code 12014 Wycliff Ln Austin, TX 78727		\$350.00	}
		, Adding TATION 2.		 	
<u> </u>	Principal occur	pation / Job title (See Instructions)	Employer (See In:	1	Texas, complete Schedule T)
	Attorney	adon / 300 tine (Gee instructions)	McLean & Howa		
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	01/19/2009	Contributor address; City; State; Zip Code 9203 Bluegrass Drive Austin, TX 78759		\$150.00	}
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See In:	structions)	
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	01/27/2009	Contributor address; City; State; Zip Code 3303 Mount Bonnell Dr. Austin, TX 78731		\$350.00	l 1
				(If travel outside of	Texas, complete Schedule T)
	Principal occupa	ation / Job title (See Instructions)	Employer (See Ins Hughes Building		
	Date	Full name of contributor	£)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	01/09/2009	Contributor address; City; State; Zip Code 7403 Dallas Austin, TX 78727		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See Ins	structions)	
			Requested		

The Instruction Guide explains how to complete this form.	The Control of the Co	1 PAGE# Schedule: 31	/71 Report: 33/81	
2 FILER NAME Cole, Sheryl	•	3 ACCOUNT # 00000009	(Ethics Commission filers)	
4 Date 5 Full name of contributor ☐ out-of-state PAC (ID Hutton, Rob & Claudia	D#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
01/30/2009 6 Contributor address; City; State; Zip Code 13414 Shore Vista Drive Austin, TX 78732)	\$350.00	 	
		(If travel outside of	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) real estate / requsted	10 Employer (See In D.R. Horton / re			
Date Full name of contributor ut-of-state PAC (IE Hyatt, Diane	D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
01/01/2009 Contributor address; City; State; Zip Code P.O. Box 162452 Austin, TX 78716		\$350.00] 	
		(If travel outside of	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Environmental Systems Manager	Employer (See In CH2MHill	structions)		
Date Full name of contributor ☐ out-of-state PAC (ID Inman, Bobby	D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
02/01/2009 Contributor address; City; State; Zip Code 3200 Riva Ridge Road Austin, TX 78746		\$350.00	 	
		(If travel outside of	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) investor	Employer (See In self	structions)		
Date Full name of contributor out-of-state PAC (ID Israel, Celia	D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
03/25/2009 Contributor address; City; State; Zip Code 3604 Carla Dr. Austin, TX 78754		\$100.00	 	
		(If travel outside of	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)	Employer (See In	structions)		
Date Full name of contributor ☐ out-of-state PAC (ID Jackson, Keith & Joyce	D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
02/03/2009 Contributor address; City; State; Zip Code 504 E. 42nd St. Austin, TX 78751-4302		\$500.00	 	
		(If travel outside of	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Vice President / owner	Employer (See In PBS&J / Cook	•		

	The Instruction	อง Guide explains how to complete this form.		1 PAGE#	
_				Schedule: 32	2/71 Report: 34/81
2	FILER NAME	Cole, Sheryl		3 ACCOUNT# 00000009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Jackson, Robena	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
: : :	01/06/2009	6 Contributor address; City; State; Zip Code 5900 Rain Creek Parkway Austin, TX 78759		\$200.00	
	1			(If travel outside of	Texas, complete Schedule T)
9	Principal occup Public Advoc	acy	10 Employer (See In RJW Operation		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	03/30/2009	Contributor address; City; State; Zip Code 1809 Whitney Way Austin, TX 78741		\$250.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Attorney	eation / Job title (See Instructions)	Employer (See In University of Te		
	Date	Full name of contributor	<u></u> ;)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	03/26/2009	Contributor address; City; State; Zip Code 901 Forest View Dr. Austin, TX 78746-4521	• • • • • • • • • • • • • • • • • • • •	\$350.00	} [[
				(If travel outside of	Texas, complete Schedule T)
⊢	Principal occur	pation / Job title (See Instructions)	Employer (See In	,	Texas, complete ochedule 1)
	attorney	anon 7 300 thre (See Hishachors)	Jackson Walker		
	Date	Full name of contributor □ out-of-state PAC (ID# Jefferson, Sedora	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	01/12/2009	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) Employer (See Instructions)				
⊨	Date	Full name of contributor	1	Amount of	In-kind contribution
	Date	Jobes, Helen	·	contribution (\$)	description (if applicable)
	03/25/2009	Contributor address; City; State; Zip Code P.O. Box 26873 Austin, TX 78755		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Principal	ation / Job title (See Instructions)	Employer (See In: Gold Eagle Inve	structions)	
l					

The Instruction Guide explains how to complete this form.	1 PAGE#			
2 CUED NAME Colo Chomi	Schedule: 33/71 Report: 35/81			
2 FILER NAME Cole, Sheryl	3 ACCOUNT # (Ethics Commission filers) 00000009			
4 Date 5 Full name of contributor □ out-of-state PAC (II Johnson, Cliff	D#) 7 Amount of 8 In-kind contribution contribution (\$) description (if applicable)			
01/12/2009 6 Contributor address; City; State; Zip Code Not Provided Austin, TX 78701	\$350.00			
	(If travel outside of Texas, complete Schedule T)			
9 Principal occupation / Job title (See Instructions) Principal	10 Employer (See Instructions) Textiles Strategies			
Date Full name of contributor ut-of-state PAC (II Johnson, Thomas	D#) Amount of In-kind contribution contribution (\$) description (if applicable)			
01/23/2009 Contributor address; City; State; Zip Code 4964 Prince Edward Rd. Jacksonville, FL 32210	\$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 (II Jones, Kenneth & Annette	D#) Amount of In-kind contribution contribution (\$) description (if applicable)			
01/02/2009 Contributor address; City; State; Zip Code 101 Crestwood Ct. Austin, TX 78746	\$700.00			
	(If travel outside of Texas, complete Schedule T)			
Principal occupation / Job title (See Instructions) attorney / homemaker	Employer (See Instructions) Armbrust & Brown, L.L.P. / none			
Date Full name of contributor ☐ out-of-state PAC (II Jones, Melissa	O#) Amount of In-kind contribution contribution (\$) description (if applicable)			
03/11/2009 Contributor address; City; State; Zip Code 2513 McCallum Dr. Austin, TX 78703	\$150.00 I			
	(If travel outside of Texas, complete Schedule T)			
Principal occupation / Job title (See Instructions) community volunteer	Employer (See Instructions) none			
Date Full name of contributor out-of-state PAC (II Kargbo, Edward	O#) Amount of In-kind contribution contribution (\$) description (if applicable)			
02/03/2009 Contributor address; City; State; Zip Code 7200 Waterline Rd. Austin, TX 78731	\$350.00			
	(If travel outside of Texas, complete Schedule T)			
Principal occupation / Job title (See Instructions) General Manager	Employer (See Instructions) Yellow Cab			

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The Instructi	ON GUIDE explains how to complete this form.	· · · · · · · · · · · · · · · · · · ·	1 PAGE#	I/71 Report: 36/81
2 FILER NAME	Cole, Sheryl		3 ACCOUNT# 00000009	(Ethics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID: Kassa, Solomon	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
02/20/2009	6 Contributor address; City; State; Zip Code 2958 Donnell Dr. Round Rock, TX 78664		\$300.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occur Founder	oation / Job title (See Instructions)	10 Employer (See In Lone Star Cab	structions)	
Date	Full name of contributor	/)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/30/2009	Contributor address; City; State; Zip Code 1603 Westover Rd. Austin, TX 78703		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occur	Deation / Job title (See Instructions)	Employer (See In	L	Texas, complete constitution 17
	,			
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/23/2009	Contributor address; City; State; Zip Code 2701 Verde Vista Austin, TX 78703		\$100.00	!
			1 '	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)
02/27/2009	Contributor address; City; State; Zip Code 515 Congress Ave. #1500	• • • • • • • • • • • • • • • • • • • •	\$100.00	
	Austin, TX 78701		(If travel outside of	Texas, complete Schedule T)
Principal occur	pation / Job title (See Instructions)	Employer (See In	1	Texas, complete schedule 1)
	,	F		
Date	Full name of contributor	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/29/2009	Contributor address; City; State; Zip Code 1714 W. 10th Austin, TX 78703		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occur	pation / Job title (See Instructions)	Employer (See In	structions)	

SCHEDULE A

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

The Instruc	TION GUIDE explains how to complete this form.		1 PAGE# Schedule: 35	5/71 Report: 37/81
2 FILER NAME	E Cole, Sheryl		3 ACCOUNT# 00000009	(Ethics Commission filers)
4 Date	5 Full name of contributor	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
01/06/2009	6 Contributor address; City; State; Zip Code 7914 Bee Caves Rd. Austin, TX 78746		\$700.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occ President /	upation / Job title (See Instructions) President	10 Employer (See In Encotech / Acc	istructions) urate CAD and Te	echnical Services
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/06/2009	Contributor address; City; State; Zip Code 7914 Bee Caves Rd. Austin, TX 78746		\$350.00	
			(if travel outside of	Texas, complete Schedule T)
Principal occ teacher	upation / Job title (See Instructions)	Employer (See In The Children's		
Date	Full name of contributor	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/23/2009	Contributor address; City; State; Zip Code 4717 Crestline Fort Worth, TX 76107	• • • • • • • • • • • • • • • • • • • •	\$200.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occ	upation / Job title (See Instructions)	Employer (See In Requested	structions)	
Date	Full name of contributor	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/28/2009	Contributor address; City; State; Zip Code 4212 Park Hollow Court Austin, TX 78746		\$250.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occi President	upation / Job title (See Instructions)	Employer (See In Good Company	structions)	, , , , , , , , , , , , , , , , , , ,
Date	Full name of contributor ut-of-state PAC (ID#	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/12/2009	Contributor address; City; State; Zip Code 4419 Barrow Austin, TX 78751		\$350.00]
	The state of the s		المناه المناهد	Towns complete School-1- Tt
Principal occi Comptroller	upation / Job title (See Instructions)	Employer (See In: SXSW	1 '	Texas, complete Schedule T)

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	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 36	i/71 Report: 38/81
2	FILER NAME	Cole, Sheryl		3 ACCOUNT# 00000009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Knight, James and Alexa)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	01/24/2009	6 Contributor address; City; State; Zip Code 400 Las Lomas Dr. Austin, TX 78746		\$700.00	} } }
]		<u> </u>		(If travel outside of	Texas, complete Schedule T)
9	Principal occup Principal / no	ation / Job title (See Instructions) ne	10 Employer (See In Bury & Partners		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	02/02/2009	Contributor address; City; State; Zip Code 3200 Kittowa Cove Austin, TX 78746		\$200.00	
				1 '	Texas, complete Schedule T)
	Principal occup attorney	vation / Job title (See Instructions)	Employer (See In Baker Botts LLF		
	Date	Full name of contributor ☐ out-of-state PAC (ID# Koeninger, Sara)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	02/19/2009	Contributor address; City; State; Zip Code 801 W. 5th St. #704 Austin, TX 78703		\$200.00	
├-	Dissipal	asian / Jah sisla /Con Jankarasiana)		<u> </u>	Texas, complete schedule 17
	Vice Presider		Employer (See In Balcones Reso		
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	01/02/2009	Contributor address; City; State; Zip Code 100 Congress Ave. Ste. 1300 Austin, TX 78701		\$700.00	1
				(If travel outside of	Texas, complete Schedule T)
	Principal occup attorney / hon	ation / Job title (See Instructions) nemaker	Employer (See In Armbrust & Bro	structions) wn, L.L.P. / none	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	03/25/2009	Contributor address; City; State; Zip Code 1628 Westlake Dr. Austin, TX 78746		\$700.00	t
	ļ			(If travel outside of	Texas, complete Schedule T)
		ation / Job title (See Instructions)	Employer (See In:		
	President / Co	o-Owner	Journeyman Co	enstruction / Journ	eyman Const.

	The INSTRUCTION	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 37	7/71 Report: 39/81	
2	FILER NAME	Cole, Sheryl		3 ACCOUNT# 00000009	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Lackey, Deborah	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	01/27/2009	6 Contributor address; City; State; Zip Code 2308 Townes Lane Austin, TX 78703		\$350.00	 	
			ļ	(If travel outside of	Texas, complete Schedule T)	
9	Principal occup Media Specia	alist Job title (See Instructions)	10 Employer (See Ins KWTX Media	structions)		
	Date	Full name of contributor	<u>, </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	01/12/2009	Contributor address; City; State; Zip Code 2925 Briarpark Dr. 4th Floor		\$350.00	 	
		Houston, TX 77042		1 '	Texas, complete Schedule T)	
	Principal occup	pation / Job title (See Instructions)	Employer (See In:	structions)		
			1			
	Date	Full name of contributor ut-of-state PAC (ID# Larson, Dohn	<u>; </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	02/23/2009	Contributor address; City; State; Zip Code 1008 East 44th St. Austin, TX 78751		\$350.00	[
				<u> </u>	Texas, complete Schedule T)	
	Principal occup	pation / Job title (See Instructions)	Employer (See Ins Texas Classroo	structions) om Teachers Asso	ciation	
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)	
	01/26/2009	Contributor address; City; State; Zip Code 1112 W 10th Street Austin, TX 78703		\$200.00	1 1 1	
		i	•	(If travel outside of	Texas, complete Schedule 7)	
	Principal occupationney	pation / Job title (See Instructions)	Employer (See Ins Graves Doughe	structions)		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	01/23/2009	Contributor address; City; State; Zip Code 606 Brainard Circle Lafayette, CO 80026		\$700.00	 	
	1	I		الموادة المستعددة	To the committee Sahadula TV	
	Principal occur	pation / Job title (See Instructions)	Employer (See Ins	L	Texas, complete Schedule T)	
	engineer / sale		MWH / Nautilus			

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 38	3/71 Report: 40/81
2	FILER NAME	Cole, Sheryl		3 ACCOUNT# 00000009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Law Office of Hubert Bell, Jr.)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	02/21/2009	6 Contributor address; City; State; Zip Code 1907 North Lamar Blvd., Ste. 300 Austin, TX 78705		\$100.00	† -
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	01/08/2009	Contributor address; City; State; Zip Code Law Offices of Joseph Parker P.O. Box 69		\$300.00	
		Austin, TX 78767		(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	'	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	03/27/2009	Contributor address; City; State; Zip Code 3834 Promontory Point Drive Austin, TX 78744		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Chairman	ation / Job title (See Instructions)	Employer (See In: Centex Beverag		
	Date	Full name of contributor ut-of-state PAC (ID# Lee, Chien-Ying & Linwen)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	01/06/2009	Contributor address; City; State; Zip Code 8303 Pommel Cove Austin, TX 78759		\$700.00	{ }
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Principal / Ho	ation / Job title (See Instructions) usewife	Employer (See In: Hejl, Lee & Asse	structions) ociates, Inc. / No	ne
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	01/10/2009	Contributor address; City; State; Zip Code 2911 Kassarine Pass Austin, TX 78704-4628		\$100.00	
		7.00min (75.70) 07.7020			
	Principal occurs	ation / Job title (See Instructions)	Employer (See In:	l '	Texas, complete Schedule T)
	Timelpal occup	enon / ood une (oee manuununa)	Employer (Ode III:	au douona)	

	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 39	/71 Report: 41/81	
2	FILER NAME	Cole, Sheryl		3 ACCOUNT # 00000009	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Lewis, Richard & Keli	/)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
 	02/04/2009	6 Contributor address; City; State; Zip Code 2503 Del Prado Blvd., Ste. 430 Cape Coral, FL 33904		\$700.00	} [[
				(If travel outside of	Texas, complete Schedule T)	
9	Principal occup engineer / ho	ation / Job title (See Instructions) usewife	10 Employer (See In MWH / none	structions)		
	Date	Full name of contributor	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
\ 	01/27/2009	Contributor address; City; State; Zip Code 241 Woodland Drive Driftwood, TX 78619		\$700.00	} [
				<u> </u>	Texas, complete Schedule T)	
		ation / Job title (See Instructions) rtner / Teacher	Employer (See In Bury & Partners	structions) s / Dripping Spring	s ISD	
	Date	Full name of contributor	(*)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	02/20/2009	Contributor address; City; State; Zip Code 12005 Uplands Ridge Dr. Austin, TX 78738		\$200.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup attorney	ation / Job title (See Instructions)	Employer (See In Dubois, Bryant			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	01/27/2009	Contributor address; City; State; Zip Code 3502 Lost Creek Blvd. Austin, TX 78735-8208		\$350.00	 	
				(if travel outside of	Texas, complete Schedule T)	
	Principal occup President	ation / Job title (See Instructions)	Employer (See In: Land Strategies		-	
	Date	Full name of contributor ut-of-state PAC (ID# Littlefield, Sue Brooks)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	01/02/2009	Contributor address; City; State; Zip Code 204 Westhaven Dr. Austin, TX 78746		\$350.00		
				(If travel outside of	Texas, complete Schedule T)	
		ation / Job title (See Instructions)	Employer (See In:			
	attorney		Armbrust & Brow	WII, L.L.P.		

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	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 40)/71 Report: 42/81	
2	FILER NAME	Cole, Sheryl		3 ACCOUNT # 00000009	(Ethics Commission filers)	
4	Date	5 Full name of contributor	¥)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	03/14/2009	6 Contributor address; City; State; Zip Code 4542 El Prieto Rd. Altadena, CA 91001		\$200.00	 	
				(If travel outside of	Texas, complete Schedule T)	
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In Retired	structions)		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	03/03/2009	Contributor address; City; State; Zip Code 5712 Painted Valley Dr. Austin, TX 78759		\$350.00] { 1	
				1	Texas, complete Schedule T)	
	Principal occup Judge	eation / Job title (See Instructions)	Employer (See In State of Texas	structions)		
	Date	Full name of contributor	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	03/05/2009	Contributor address; City; State; Zip Code 1400 Elton Lane		\$700.00	 	
		Austin, TX 78703		(If travel outside of	Texas, complete Schedule T)	
		ation / Job title (See Instructions) ommunity volunteer	Employer (See In Blake McGee C	structions) company, L.P. / no	one	
	Date	Full name of contributor	<u>; </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	01/02/2009	Contributor address; City; State; Zip Code 2212 East Windsor Rd. Austin, TX 78703		\$350.00	 	
				(If trave) outside of	Texas, complete Schedule T)	
	Principal occup Principal	ation / Job title (See Instructions)	Employer (See In Endeavor	L .	,	
 		5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			1	
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	03/07/2009	Contributor address; City; State; Zip Code 2810 Townes Lane Austin, TX 78703		\$200.00	 	
		7.00mg 17.70100				
	Dalasti - 1	attan I lab titla (One tasks attant)	F	'	Texas, complete Schedule T)	
		ation / Job title (See Instructions) ctor & Senior Attorney, Texas Office	Employer (See In: Environmental [

1 PAGE # Schedule: 41/71 Report: 43/81
3 ACCOUNT # (Ethics Commission filers) 00000009
#) 7 Amount of 8 In-kind contribution contribution (\$) description (if applicable)
\$150.00 I I I I I I I I I
(If travel outside of Texas, complete Schedule T)
10 Employer (See Instructions)
#) Amount of In-kind contribution contribution (\$) description (if applicable)
\$200.00
(If travel outside of Texas, complete Schedule T)
Employer (See Instructions) Matt Mathias & Company
#) Amount of In-kind contribution contribution (\$) description (if applicable)
\$200.00
(If travel outside of Texas, complete Schedule T)
Employer (See Instructions)
Self
#) Amount of In-kind contribution contribution (\$) description (if applicable)
\$350.00
(If travel outside of Texas, complete Schedule T)
Employer (See Instructions) West Lake Hills Presbyterian
#) Amount of In-kind contribution contribution (\$) description (if applicable)
\$350.00
(If travel outside of Texas, complete Schedule T)
Employer (See Instructions) St. Davids Community Health Foundation
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\vdash	The Instruction	on Guide explains how to complete this form.		1 PAGE#		
L	THE INSTRUCTA			Schedule: 42	2/71 Report: 44/81	
2	FILER NAME	Cole, Sheryl		3 ACCOUNT#	(Ethics Commission filers)	
ļ				00000009		
4	Date	5 Full name of contributor ut-of-state PAC (ID#	<u> </u>	7 Amount of	8 In-kind contribution	
		McArthur, Eve		contribution (\$)	description (if applicable)	
	01/08/2009	6 Contributor address; City; State; Zip Code 3406 Lakeside Dr.		\$350.00	I I	
		Austin, TX 78723			1	
					Texas, complete Schedule T)	
9	Principal occup Operations D	eation / Job title (See Instructions) irector	10 Employer (See In SXSW Inc.	structions)		
	Date	Full name of contributor 🔲 out-of-state PAC (ID#	!)	Amount of	In-kind contribution	
		McClellan, Dan		contribution (\$)	description (if applicable)	
	01/25/2009	Contributor address; City; State; Zip Code		\$250.00	1	
	0 11 201 200	802 Terrace Mountain Drive Austin, TX 78746		V 200,00	! }	
┝	Principal occur	ation / Job title (See Instructions)	Employer (See In	1 <u></u>	Texas, complete Schedule T)	
1	biowatch coo		TCEQ	2., 23., 3., 5.,		
⊨	Dete	Full name of contributor		Amount of	In-kind contribution	
	Date	McClendon, Burwell)	contribution (\$)	description (if applicable)	
	02/04/2009	Contributor address; City; State; Zip Code		\$350.00	! 	
		1905 Canonero Dr. Austin, TX 78746				
				(if travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	'		
	real estate		D.R. Horton		!	
	Date	Full name of contributor ut-of-state PAC (ID#)	Amount of	In-kind contribution	
		McCormack, James		contribution (\$)	description (if applicable)	
	02/17/2009	Contributor address; City; State; Zip Code	• • • • • • • • • • • • • • • • • • • •	\$100.00	<u> </u>	
Ì		9804 Scenic Bluff Dr. Austin, TX 78733		•	! !	
					'	
L	Principal occur	ation / Job title (See Instructions)	Employer (See In	·	Texas, complete Schedule T)	
	- Timopai occap	,		,		
	Date	Full name of contributor uut-of-state PAC (ID# McDaniel, Dennis & Jill)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
				, ,	l ' ' ' ' I	
}	01/19/2009	Contributor address; City; State; Zip Code		\$700.00	<u> </u> 	
}		906 Crystal Creek Drive Austin, TX 78746				
				(If travel outside of	Texas, complete Schedule T)	
-	•	ation / Job title (See Instructions)	Employer (See In:	structions)		
	Director / artis	it	Austin Fair Child	d Art Foundation /	self	

	<u> </u>			
The Instruction	ON GUIDE explains how to complete this form.		1 PAGE#	/71 Report: 45/81
2 FILER NAME	Cole, Sheryl		3 ACCOUNT # 00000009	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID: McDaniel, Myra	‡)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
01/29/2009	6 Contributor address; City; State; Zip Code 3910 Knollwood Dr Austin, TX 78731	••••••	\$100.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/23/2009	Contributor address; City; State; Zip Code 6911 Hickory Creek Lane Dallas, TX 75252		\$500.00	1 ! !
	1		(if travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In Requested	structions)	
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/12/2009	Contributor address; City; State; Zip Code 2407 McCullough St Austin, TX 78703		\$100.00	
			,	I Texas, complete Schedule T)
Principal occur	pation / Job title (See Instructions)	Employer (See In:	structions)	
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/30/2009	Contributor address; City; State; Zip Code 6300A Carson Ridge Austin, TX 78741		\$100.00	
			•	Texas, complete Schedule T)
Principal occup	eation / Job title (See Instructions)	Employer (See In:	structions)	
Date	Full name of contributor ☐ out-of-state PAC (ID# McKetta, John J. Mike)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01/23/2009	Contributor address; City; State; Zip Code 4200 Park Hollow Court Austin, TX 78746		\$100.00	1 1 1
			(If travel outside of	Texas, complete Schedule T)
Principal occup	etion / Job title (See Instructions)	Employer (See In:	structions)	

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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 44	I/71 Report: 46/81
2	FILER NAME	Cole, Sheryl		3 ACCOUNT# 00000009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID≴ McWilliams, Andrea and Dean	<u> </u>	7 Amount of contribution (\$)	8
	01/16/2009	6 Contributor address; City; State; Zip Code 1710 Windsor Rd. Austin, TX 78703		\$700.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup consultant / C	ation / Job title (See Instructions) consultant	10 Employer (See In McWilliams & A	structions) ssoc. / McWilliam	s & Assoc.
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	02/23/2009	Contributor address; City; State; Zip Code 19822 Teller Blvd		\$200.00	
		Spring, TX 77388		,	Texas, complete Schedule T)
	Principal occup retired	pation / Job title (See Instructions)	Employer (See In retired	structions)	
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	02/23/2009	Contributor address; City; State; Zip Code 1024 Downridge Dr. Leander, TX 78641		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Mendez, David)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	01/29/2009	Contributor address; City; State; Zip Code 4401 Sacred Arrow Dr.		\$200.00	
		Austin, TX 78735		(If travel outside of	Texas, complete Schedule T)
	Principal occup attorney	ation / Job title (See Instructions)	Employer (See In: Bickerstaff Heat		Kever & McDaniel
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	02/04/2009	Contributor address; City; State; Zip Code 6200 Westside Drive Austin, TX 78731		\$100.00	!
				(If travel outside of	Texas, complete Schedule T)
	Principal occur	ation / Job title (See Instructions)	Employer (See Ins	,	. o.co, complete contents //
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	The INSTRUCTION	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 45	5/71 Report: 47/81
2	FILER NAME	Cole, Sheryl		3 ACCOUNT # 00000009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Mendiola, Lino	<u> </u>	7 Amount of contribution (\$)	I 8 In-kind contribution description (if applicable)
	03/20/2009	6 Contributor address; City; State; Zip Code 2404 Vance Ln. Austin, TX 78746		\$125.00	1
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor ☐ out-of-state PAC (ID# Mendiola, Natalie	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	01/13/2009	Contributor address; City; State; Zip Code 4419 Barrow Austin, TX 78751		\$350.00	
					Texas, complete Schedule T)
	Principal occup Attorney	eation / Job title (See Instructions)	Employer (See In Andrews & Kurt		
	Date	Full name of contributor ☐ out-of-state PAC (ID# Meredith, Thomas and Lynn	<u>+</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	01/14/2009	Contributor address; City; State; Zip Code 70 Pascal Lane Austin, TX 78746		\$700.00	
Į				(If traval outside of	Texas, complete Schedule T)
	Principal occur	vation / Job title (See Instructions)	Employer (See In	1	
	CEO / Philant		MFI Capital / MI		
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	02/15/2009	Contributor address; City; State; Zip Code 4501 E. Riverside Dr. Apt. 2032 Austin, TX 78741		\$300.00	I
				(if travel outside of	Texas, complete Schedule T)
	Principal occup Taxi Driver	ation / Job title (See Instructions)	Employer (See In: Lone Star Cab	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	02/19/2009	Contributor address; City; State; Zip Code 4501 E. Riverside Dr. Apt. 2032 Apt 2032 Austin, TX 78741		\$200.00	
		Addung TATOTET		(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	,	_
	Taxi Driver		Lone Star Cab	•	

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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 46	/71 Report: 48/81
2	FILER NAME	Cole, Sheryl		3 ACCOUNT # 00000009	(Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (ID# Michel, Travis	<u></u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	01/06/2009	6 Contributor address; City; State; Zip Code 5903 Marchmont Austin, TX 78749		\$250.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Civil Engineer	oation / Job title (See Instructions) er	10 Employer (See In Espey Consulta		
	Date	Full name of contributor	<u>; </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	01/22/2009	Contributor address; City; State; Zip Code 221 W. 6th Street, Suite 1300 Austin, TX 78701		\$700.00	
L			 	1 '	Texas, complete Schedule T)
	Principal occup Prinicipal / ret	pation / Job title (See Instructions) tail	Employer (See In Endeavor Real	structions) Estate / Neiman M	/larcus
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	02/22/2009	Contributor address; City; State; Zip Code 8101 Danforth Cv. Austin, TX 78746		\$100.00	
ĺ				(If travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor □ out-of-state PAC (ID# Moffat, Susan)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	01/12/2009	Contributor address; City; State; Zip Code 4112 Speedway Austin, TX 78751		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup researcher/wr	pation / Job title (See Instructions) riter	Employer (See In self	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Moore, Blanton)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	03/07/2009	Contributor address; City; State; Zip Code P.O. Box 13221 Austin, TX 78711		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occur	pation / Job title (See Instructions)	Employer (See In:	L .	
l I	г.	, , , , , , , , , , , , , , , , , , , ,	F1a- /aaa iii		

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	The Instruction	אס Guide explains how to complete this form.		1 PAGE # Schedule: 47	7/71 Report: 49/81			
2	FILER NAME	Cole, Sheryl		3 ACCOUNT# 00000009	(Ethics Commission filers)			
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Morgan, Tom & Sheila Lummis	‡)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
	01/08/2009	6 Contributor address; City; State; Zip Code 3302 Harris Park Ave. Austin, TX 78705		\$700.00	 			
}				(If travel outside of	Texas, complete Schedule T)			
9	Principal occup Lawyer / acco	ation / Job title (See Instructions) ountant	10 Employer (See In Texas Associati Servi		exas Health and Human			
	Date	Full name of contributor □ out-of-state PAC (ID# Moriarty, William)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	01/01/2009	Contributor address; City; State; Zip Code 400 N. Lowell Ln. Austin, TX 78733		\$350.00	 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	<u> </u>			
			requested					
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	03/21/2009	Contributor address; City; State; Zip Code 4205 Ramsey Ave. Austin, TX 78756		\$100.00	 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup	ation / Job title (See Instructions)	Employer (See In	•				
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	01/14/2009	Contributor address; City; State; Zip Code 19835 Cypress Church Rd. Cypress, TX 77433-1479		\$150.00	 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	01/22/2009	Contributor address; City; State; Zip Code 104 Summer GIn Boerne, TX 78006-6090		\$250.00	 			
					Texas, complete Schedule T)			
	Principal occup Principal/ Vice	ation / Job title (See Instructions) e President	Employer (See In: LNV Engineerin					

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	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 48	/71 Report: 50/81		
2	FILER NAME	Cole, Sheryl		3 ACCOUNT# 00000009	(Ethics Commission filers)		
4	Date	5 Full name of contributor	<u></u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	01/23/2009	6 Contributor address; City; State; Zip Code 104 Summer Gin Boerne, TX 78006-6090	• • • • • • • • • • • • • • • • • • • •	\$250.00	 		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup requested	ation / Job title (See Instructions)	10 Employer (See In requested	structions)			
	Date	Full name of contributor	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	01/21/2009	Contributor address; City; State; Zip Code 3830 Hunterwood Point Austin, TX 78746		\$700.00	} }		
	:			<u> </u>	Texas, complete Schedule T)		
	Principal occup Principal / ho	ation / Job title (See Instructions) memaker	Employer (See In Endeavor Real	structions) Estate Group / no	one		
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	03/03/2009	Contributor address; City; State; Zip Code 1116 Reagan Terrace Austin, TX 78704		\$350.00	 		
		,		(If travel outside of	Texas, complete Schedule T)		
	Principal occup attorney	ation / Job title (See Instructions)	Employer (See In Jackson Walker				
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	02/03/2009	Contributor address; City; State; Zip Code 4328 Canoas Dr. Austin, TX 78730		\$500.00	 		
				(If travel outside of	Texas, complete Schedule T)		
		ation / Job title (See Instructions)	Employer (See In Freese & Nicho				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	02/03/2009	Contributor address; City; State; Zip Code P.O. Box 162133 Austin, TX 78716		\$350.00			
				(If travel outside of	Texas, complete Schedule T)		
\vdash	Principal occup Principal	ation / Job title (See Instructions)	Employer (See In: SCC Developm	structions)			
(rincipal		200 Developin	GIIL			

	The Instruction	GUIDE explains how to complete this form.			1 PAGE# Schedule: 49	1/71 Report: 51/81
2	FILER NAME	Cole, Sheryl			3 ACCOUNT# 00000009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state Nowlin, Bettye	PAC (ID#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	01/13/2009	6 Contributor address; City; State; 2 3327 Far View Dr. Austin, TX 78730	Zip Code		\$350.00	1 1 1
					(if travel outside of	Texas, complete Schedule T)
9	Principal occup philanthropist	ation / Job title (See Instructions)		10 Employer (See In none	structions)	
	Date	Full name of contributor	PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	01/06/2009	Contributor address; City; State; 2 3215 Hampton Rd. Austin, TX 78705	Zip Code		\$100.00	,
					(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)		Employer (See In		
	Date	Full name of contributor	PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	01/01/2009	Contributor address; City; State; Z 2878 Post Rock Drive Tarpon Springs, FL 34688	Zip Code		\$350.00	! ! !
					(If travel outside of	Texas, complete Schedule T)
	Principal occup engineer	ation / Job title (See Instructions)		Employer (See In King Engineerir	•	
	Date	Full name of contributor	PAC (ID#	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	01/27/2009	Contributor address; City; State; Z 2302 Horn Ln. Austin, TX 78703	Zip Code		\$350.00	
					(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)		Employer (See In Requested	structions)	
•	Date	Full name of contributor	PAC (ID#	!)	Amount of contribution (\$)	In-kind contribution description (If applicable)
	01/27/2009	Contributor address; City; State; Z 1016 Mopac Circle Ste. 101 Austin, TX 78746	Zip Code		\$100.00	
					(If travel outside of	Texas, complete Schedule T)
	Principal occupa	ation / Job title (See Instructions)		Employer (See In	structions)	

	The Instruction	ON GUIDE explains how to complete this form.	. •	1 PAGE#	·		
L				Schedule: 50)/71 Report: 52/81		
2	FILER NAME	Cole, Sheryl		3 ACCOUNT# 00000009	(Ethics Commission filers)		
4	Date	5 Full name of contributor	;)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	02/03/2009	6 Contributor address; City; State; Zip Code 10003 Brantley Bend Austin, TX 78748	•	\$100.00] 		
	:			(if travel outside of	Texas, complete Schedule T)		
9	Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)			
	Date	Full name of contributor ut-of-state PAC (ID# Osherow, William	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	01/26/2009	Contributor address; City; State; Zip Code 7200 West Rim Dr. Austin, TX 78731-2027		\$350.00	 		
				(If travel outside of	Texas, complete Schedule T)		
一		pation / Job title (See Instructions)	Employer (See In	structions)			
L	principal		Endeavor Real	Estate Group			
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	02/02/2009	Contributor address; City; State; Zip Code 9232 La Siesta Bend Austin, TX 78749		\$350.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup principal engi	ation / Job title (See Instructions) neer	Employer (See In K Friese & Asso				
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	01/27/2009	Contributor address; City; State; Zip Code 111 Congress Ave, Suite 1400 Austin, TX 78701		\$350.00	 		
				(if travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	02/02/2009	Contributor address; City; State; Zip Code 8113 Vailview Cove Austin, TX 78750		\$100.00	! !		
		i 		(If travel outside of	Texas, complete Schedule T)		
-	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
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	The INSTRUCTION	אס Guide explains how to complete this form.		1 PAGE# Schedule: 51	/71 Report: 53/81			
2	FILER NAME	Cole, Sheryl		3 ACCOUNT # 00000009	(Ethics Commission filers)			
4	Date	5 Full name of contributor □ out-of-state PAC (ID# Pastor, Andrew & Laura	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
	01/26/2009	6 Contributor address; City; State; Zip Code 2908 Sparkling Brook Lane Austin, TX 78746		\$700.00	 			
				(If travel outside of	Texas, complete Schedule T)			
9	Principal occup Principal / mu	ation / Job title (See Instructions) isician	10 Employer (See In Endeavor Real					
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	01/16/2009	Contributor address; City; State; Zip Code 915 W. Oltorf Austin, TX 78704		\$350.00	 			
				L `	Texas, complete Schedule T)			
	Principal occup Retail	eation / Job title (See Instructions)	Employer (See In Self	structions)				
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	01/21/2009	Contributor address; City; State; Zip Code P.O. BOX 50033 Austin, TX 78763		\$500.00	 			
					Texas, complete Schedule T)			
	Principal occup retired	ation / Job title (See Instructions)	Employer (See In: retired	structions)				
	Date	Full name of contributor ut-of-state PAC (ID# Pedersen, Craig	1)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	02/03/2009	Contributor address; City; State; Zip Code 4703 Trail Crest Circle Austin, TX 78735		\$300.00	 			
				(If travel outside of	Texas, complete Schedule T)			
		ation / Job title (See Instructions) nt - Water Resources - Texas	Employer (See In URS	structions)				
	Date	Full name of contributor ut-of-state PAC (ID# Personett, Michael	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	02/03/2009	Contributor address; City; State; Zip Code 2802 Jorwoods Dr. Austin, TX 78745		\$100.00	! ! !			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)				
}								

	The Instruction	ON GUIDE explains how to complete this form.			1 PAGE# Schedule: 52/	/71 Report: 54/81	
2	FILER NAME	Cole, Sheryl			3 ACCOUNT # 00000009	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state P Pesoli, Christina	AC (ID#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	01/28/2009	6 Contributor address; City; State; Zip 5801 Travis Green Lane Austin, TX 78735	Code		\$350.00 		
					(if travel outside of	Texas, complete Schedule T)	
9	Principal occup Attorney	pation / Job title (See Instructions)		yer (See Inst			
	Date	Full name of contributor ut-of-state F	AC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	01/21/2009	Contributor address; City; State; Zir 1 Coleridge Lane	Code		\$150.00 h	 	
		Austin, TX 78746					
<u> </u>	Dringing age	otion / Joh title (Coe Instructions)	Employ	yer (See Inst	<u> </u>	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employ	yer (See ilisi	eractions)		
	Date	Full name of contributor uut-of-state F Pierce, Archie	AC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	02/09/2009	Contributor address; City; State; Zip 221 W. 6th Ste. 1800 Austin, TX 78701	Code		\$100.00		
		Austin, TA 70701					
L	Principal occur	ation / Job title (See Instructions)	Employ	yer (See Inst	<u>`</u>	Texas, complete Schedule T}	
	Рипсіраї оссир	auon / 300 une (See insudcuons)	Employ	yer (See msi	i detions)		
	Date	Full name of contributor	AC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	02/05/2009	Contributor address; City; State; Zip P.O. Box 50038 Austin, TX 78763	Code		\$700.00		
		Austin, 17/10/03			'		
	Drinning Longue	ation / Jab title (Con Jacks ations)	Employ	yer (See Inst		Texas, complete Schedule T)	
		ation / Job title (See Instructions) actor / Contractor			J.Pinnelli & Co.		
	Date	Full name of contributor uut-of-state P Pollan, Thomas	AC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	02/05/2009	Contributor address; City; State; Zip 4017 Walnut Clay Dr. Austin, TX 78731	Code		\$100.00 		
					(If travel outside of ∃	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employ	er (See Inst	ructions)	· -	

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	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 53	i/71 Report: 55/81			
2	FILER NAME	Cole, Sheryl		3 ACCOUNT # 00000009	(Ethics Commission filers)			
4	Date	5 Full name of contributor ut-of-state PAC (ID#	(7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
	01/12/2009	6 Contributor address; City; State; Zip Code 2306 McCullough Austin, TX 78703		\$350.00] 			
				(If travel outside of	Texas, complete Schedule T)			
9	Principal occup consultant	ation / Job title (See Instructions)	10 Employer (See Inself	structions)				
	Date	Full name of contributor ut-of-state PAC (ID# Pringle, Ross)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
•	02/02/2009	Contributor address; City; State; Zip Code 105 W. 32nd Austin, TX 78705		\$175.00] [
		Addin, 1775700		(if travel outside of	Texas, complete Schedule T)			
\vdash	Principal occup	ation / Job title (See Instructions)	Employer (See In	<u> </u>				
	· · · · / · · / · · · · · · · · · · · ·			,				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	02/23/2009	Contributor address; City; State; Zip Code 1024 Downridge Dr. Leander, TX 78641		\$100.00	 			
				(if travel outside of	Texas, complete Schedule T)			
 	Principal occup	ation / Job title (See Instructions)	Employer (See In:	•	Texas, complete ocheddle 1/			
	•	, in the second						
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)			
	01/07/2009	Contributor address; City; State; Zip Code 5100 McDade Dr. Austin, TX 78735		\$200.00	 			
		Addin, 17 Toros		(If tenual autoida of	Texas, complete Schedule T)			
	Principal occup	ation / Job title (See Instructions)	Employer (See In:		Texas, complete schedule 1)			
	Banker		CapitalOne					
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	01/16/2009	Contributor address; City; State; Zip Code P.O. Box 690287 San Antonio, TX 78269		\$250.00	 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	T.	, ,,			

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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 54	/71 Report: 56/81			
2	FILER NAME	Cole, Sheryl		3 ACCOUNT# 00000009	(Ethics Commission filers)			
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID#Rancho Garza LTD.	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
	03/06/2009	6 Contributor address; City; State; Zip Code 17830 Serene Hills Pass Austin, TX 78738		\$350.00	 			
				(If travel outside of	Texas, complete Schedule T)			
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)				
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	03/19/2009	Contributor address; City; State; Zip Code 600 Congress Ave. Ste. 3100 Austin, TX 78701		\$200.00	 			
				. <u>`</u>	Texas, complete Schedule T)			
	Principal occup attorney	eation / Job title (See Instructions)	Employer (See In: The Ratliff Law	structions) Firm				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	01/23/2009	Contributor address; City; State; Zip Code 231 Cahas Mountain Rd. Boones Mill, VA 24065-3611		\$100.00	 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	01/14/2009	Contributor address; City; State; Zip Code 2022 Laird Dr. Salt Lake City, UT 84108		\$700.00	 			
					Texas, complete Schedule T)			
	Principal occup advertising / a	ation / Job title (See Instructions) advertising	Employer (See Ins	structions)				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	01/01/2009	Contributor address; City; State; Zip Code 1475 Federal Heights Drive Salt Lake City, UT 84103		\$350.00	[
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup advertising	ation / Job title (See Instructions)	Employer (See Ins Self					

	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 55	i/71 Report: 57/81
2	FILER NAME	Cole, Sheryl		3 ACCOUNT # 00000009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID#Reagan, Lucille)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	01/30/2009	6 Contributor address; City; State; Zip Code 4231 Westlake Dr, Apt 1D Austin, TX 78746		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup advertising	ation / Job title (See Instructions)	10 Employer (See In self	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	01/04/2009	Contributor address; City; State; Zip Code 1492 Penrose Dr. Salt Lake City, UT 84103		\$700.00	
				<u> </u>	Texas, complete Schedule T)
	Principal occup advertising / a	ation / Job title (See Instructions) advertising	Employer (See In self / self	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	01/30/2009	Contributor address; City; State; Zip Code 4100 McBrine Place Austin, TX 78746		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
		ation / Job title (See Instructions)	Employer (See In	<u> </u>	Tokas, complete concesso 1,
	advertising	ation / Job title (See Instructions)	Reagan Adverti	•	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	01/27/2009	Contributor address; City; State; Zip Code 100 Congress Ave., Ste. 780 Austin, TX 78701		\$350.00	
	-			(If travel outside of	Texas, complete Schedule T)
	Principal occup Founder	ation / Job title (See Instructions)	Employer (See In Riverside Reso		
	D-4:	[1.4] \$ and the day [1] _ 1 _ 5 _ 1.		A 4 - f	I to 122 de possibilitation
	Date	Full name of contributor ut-of-state PAC (ID# Reese, Gina)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	01/27/2009	Contributor address; City; State; Zip Code 2914 Regents Park Austin, TX 78746		\$350.00	
	}			(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	,	,
	. Imorpai occup	and the food management	Homemaker	ou doubloj	

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·	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 56	:/71 Report: 58/81
2	FILER NAME	Cole, Sheryl		3 ACCOUNT# 00000009	(Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (ID#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	01/30/2009	6 Contributor address; City; State; Zip Code 2905 Brian Wood Ct. Cedar Park, TX 78613		\$150.00	
				(if travel outside of	Texas, complete Schedule T)
9	Principal occup Vice Presider	ation / Job title (See Instructions)	10 Employer (See In Lockwood, And	structions) rews & Newnam,	Inc.
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	03/07/2009	Contributor address; City; State; Zip Code 1805 Graveyard Point Austin, TX 78734		\$100.00	
				(if travel outside of	Texas, complete Schedule T)
_	Dringing agour	ation / Job title (See Instructions)	Employer (See In	<u> </u>	Toxas, complete concesso 1,
	Principal occup	ation / Job title (See instructions)	Employer (See in	su detions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	01/27/2009	Contributor address; City; State; Zip Code 1600 Mount Larson Austin, TX 78746		\$700.00	ł
				(If travel outside of	Texas, complete Schedule T)
_	Principal occur	ation / Job title (See Instructions)	Employer (See In		Toxas complete contests //
	Principal / hor		Endeavor / non-		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	01/19/2009	Contributor address; City; State; Zip Code 328 Heartwood Dr. Austin, TX 78745		\$250.00	! ! !
	Į.			(if travel outside of	Texas, complete Schedule T)
	Principal occup lawyer	ation / Job title (See Instructions)	Employer (See In Rodriguez Law		
	Date	Full name of contributor ut-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	01/21/2009	Contributor address; City; State; Zip Code 2138 Woodston Drive Round Rock, TX 78681		\$250.00	
				(If trave) outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	L <u>. i</u>	,,
	Vice Presiden		CP&Y	5 56 110/10/	

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	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 57	/71 Report: 59/81			
2	FILER NAME	Cole, Sheryl		3 ACCOUNT# 00000009	(Ethics Commission filers)			
4	Date	5 Full name of contributor ut-of-state PAC (ID#Rose, David	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
	01/12/2009	6 Contributor address; City; State; Zip Code 6910 Langston Dr. Austin, TX 78723		\$350.00	 			
				(If travel outside of	Texas, complete Schedule T)			
9	Principal occup	vation / Job title (See Instructions)	10 Employer (See In Requested	structions)				
	Date	Full name of contributor ut-of-state PAC (ID#Ross, James	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	02/20/2009	Contributor address; City; State; Zip Code 3563 Far West Blvd. #107		\$100.00				
		Austin, TX 78731			Texas, complete Schedule T)			
	Principal occup	eation / Job title (See Instructions)	Employer (See In:	structions)				
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)			
i	01/22/2009	Contributor address; City; State; Zip Code 7112 Foxtree Cv Austin, TX 78750-7918		\$350.00	 			
				(if travel outside of	Texas, complete Schedule T)			
	Principal occup President	ation / Job title (See Instructions)	Employer (See In: Seedling Found					
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	01/23/2009	Contributor address; City; State; Zip Code 2111 Highgrove Terrace Austin, TX 78703		\$700.00				
				•	Texas, complete Schedule T)			
	Principal occup Principal / hor	ation / Job title (See Instructions) nemaker	Employer (See In: Endeavor Real	structions) Estate Group / no	ne			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	01/06/2009	Contributor address; City; State; Zip Code 1211 Meadow Lark Dr. Cedar Park, TX 78613	i	\$100.00				
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup	ation / Job title (See Instructions)	Employer (See In:		Total Complete Companie 1/			
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	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 58	9/71 Report: 60/81	
2	FILER NAME	Cole, Sheryl		3 ACCOUNT# 00000009	(Ethics Commission filers)	
4	Date	5 Full name of contributor	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	01/15/2009	6 Contributor address; City; State; Zip Code 6101 Mount Villa Cove Austin, TX 78731	•••••	\$100.00	 	
				(If travel outside of	Texas, complete Schedule T)	
9	Principal occur	pation / Job title (See Instructions)	10 Employer (See In	1. `		
Ľ				<u> </u>		
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	02/02/2009	Contributor address; City; State; Zip Code P.O. Box 99 Austin, TX 78767		\$100.00	 	
	:	Trading TX Toron		(if travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	Banker		Prosperity Bank	(
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	03/17/2009	Contributor address; City; State; Zip Code P.O. Box 99 Austin, TX 78767		\$200.00	 	
		Austri, 17,70707		(16 harried a ride and	Texas, complete Schedule T)	
	Principal occur	ation / Job title (See Instructions)	Employer (See In	i i	Texas, complete schedule 1)	
	Banker	audit 1000 due (366 misudedons)	Prosperity Bank	•		
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	01/23/2009	Contributor address; City; State; Zip Code 5700 Trailridge Dr. Austin, TX 78731		\$100.00	 	
	:	703011, 17 70707			ı —	
		10	F	<u> </u>	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	500 v.	
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
		Scarborough, Beverly		contribution (\$)	description (if applicable)	
	03/27/2009	Contributor address; City; State; Zip Code 3908 Glengarry Dr Austin, TX 78731		\$100.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See in			
	,	,		•		

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 59	9/71 Report: 61/81
2	FILER NAME	Cole, Sheryi		3 ACCOUNT # 00000009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Schissler, James	!)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	01/24/2009	6 Contributor address; City; State; Zip Code 6556 Needham Lane Austin, TX 78739		\$250.00	i ! !
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup civil engineer	ation / Job title (See Instructions)	10 Employer (See In Jones & Carter	structions)	
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	01/28/2009	Contributor address; City; State; Zip Code 911 Speer Lane Austin, TX 78745		\$350.00	
					Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In: Requested	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Scott, Wallace)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	03/13/2009	Contributor address; City; State; Zip Code 3839 Bee Cave Rd # 205 Austin, TX 78746		\$350.00	
	-			(If travel outside of	Texas, complete Schedule T)
	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In: Sutton Co.	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	01/05/2009	Contributor address; City; State; Zip Code 105 Brooks Hollow Drive Austin, TX 78734		\$700.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occupa	ation / Job title (See Instructions) nemaker	Employer (See Ins Armbrust & Brown	structions) wn, L.L.P. / none	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	01/17/2009	Contributor address; City; State; Zip Code 3114 Wheeler St. Austin, TX 78705-2816		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See Ins		19700, combing conseries (
	CEO	/	Entrepreneur's I		

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	The Instruction	ON GUIDE explains how to complete this form.	<u> </u>	1 PAGE# Schedule: 60)/71 Report: 62/81		
2	FILER NAME	Cole, Sheryl		3 ACCOUNT# 00000009	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Shaw, David	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	02/19/2009	6 Contributor address; City; State; Zip Code 7206 Running Rope Austin, TX 78731-2144		\$100.00	 		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In:	structions)			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	03/10/2009	Contributor address; City; State; Zip Code 301 Congress Ave. Ste. 1550		\$250.00	 		
		Austin, TX 78701		(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See Ins Requested	structions)			
	Date	Full name of contributor out-of-state PAC (ID# Shea, Toni Wilcox and Mike	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	01/08/2009	Contributor address; City; State; Zip Code 4801 Broken Bow Pass Austin, TX 78745		\$700.00	 		
			į	(If travel outside of	Texas, complete Schedule T)		
		ation / Job title (See Instructions) Inner / Book keeper	Employer (See Ins SXSW / Clarence				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	01/08/2009	Contributor address; City; State; Zip Code P.O. Box 5605 Austin, TX 78763		\$200.00	1 1 1		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occupa	ation / Job title (See Instructions)	Employer (See Ins Lynn Sherman t	structions) _aw Firm & Const	ulting		
-	Date	Full name of contributor ut-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	01/26/2009	Contributor address; City; State; Zip Code 604 West 11th St. Austin, TX 78701		\$150.00	i i		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)			

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	The Instruction Guide explains how to complete this form.			1 PAGE# Schedule: 61	/71 Report: 63/81		
2	FILER NAME	Cole, Sheryl		3 ACCOUNT # 00000009	(Ethics Commission filers)		
4	Date	5 Full name of contributor ut-of-state PAC (ID#	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	01/26/2009	6 Contributor address; City; State; Zip Code 5003 Lucas Lane Austin, TX 78731		\$350.00	 		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Consultant	ation / Job title (See Instructions)	10 Employer (See In Self-employed	structions)			
	Date	Full name of contributor ☐ out-of-state PAC (ID# Smith, David L. & Karen Eckert	<u></u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	01/02/2009	Contributor address; City; State; Zip Code 3102 Above Stratfordplace Austin, TX 78746	, ,	\$700.00	 		
				(If travel outside of	Texas, complete Schedule T)		
		nation / Job title (See Instructions) n / executive assistant	Employer (See In UT Austin / Arm	structions) ibrust & Brown, L.	L.P.		
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	03/25/2009	Contributor address; City; State; Zip Code 2602 Broken Oak Austin, TX 78745		\$350.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Controller	ation / Job title (See Instructions)	Employer (See In Journeyman Co	structions)			
	Date	Full name of contributor	<u>‡)</u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	02/19/2009	Contributor address; City; State; Zip Code 221 North Kansas Ste. 1700		\$150.00	 		
		El Paso, TX 79901		(If travel outside of	Texas, complete Schedule T)		
-	Principal occup	ation / Job title (See Instructions)	Employer (See In	<u> </u>	, , , , , , , , , , , , , , , , , , ,		
_	Date	Full name of contributor)	Amount of	In-kind contribution		
		Smitheal, Jeremy	i	contribution (\$)	description (if applicable)		
	01/27/2009	Contributor address; City; State; Zip Code 100 Congress Ave., Ste. 1540 Austin, TX 78701		\$100.00	 		
	i			(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In:		reads, complete somedule 17		

	The Instruction	אס Guide explains how to complete this form.		1 PAGE # Schedule: 62	2/71 Report: 64/81
2	FILER NAME	Cole, Sheryl		3 ACCOUNT# 00000009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID Snell, Farley	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	03/12/2009	6 Contributor address; City; State; Zip Code 84 W. Walnut St. No. 303 Asheville, NC 28801	••••	\$100.00	†
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	01/06/2009	Contributor address; City; State; Zip Code 2004 E. Gann Hill Cedar Park, TX 78613		\$350.00	} {
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Technician	ation / Job title (See Instructions)	Employer (See In Jennifer Regala	structions)	
 	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	03/02/2009	Contributor address; City; State; Zip Code 5408 Hurlock Drive Austin, TX 78731	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$350.00	
					Texas, complete Schedule T)
	Principal occup attorney	ation / Job title (See Instructions)	Employer (See In Baron & Budd, I		
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	02/15/2009	Contributor address; City; State; Zip Code 12618 Everhart Point Dr. Tomball, TX 77377	•••••	\$100.00	!
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
-	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	01/12/2009	Contributor address; City; State; Zip Code 4905 Avenue H Austin, TX 78751		\$350.00	;
				(If travel outside of	Texas, complete Schedule T)
		ation / Job title (See Instructions)	Employer (See In:	structions)	
	Employee		sxsw		

The Instructi	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 63	i/71 Report: 65/81		
2 FILER NAME	Cole, Sheryl		3 ACCOUNT# 00000009	(Ethics Commission filers)		
4 Date	5 Full name of contributor ut-of-state PAC (ID# Stone, Keith & Catherine	*)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
01/29/2009	6 Contributor address; City; State; Zip Code 4716 St John's Dr. Dallas, TX 75205		\$700.00	1 !		
			(if travel outside of	Texas, complete Schedule T)		
9 Principal occur President / p	pation / Job title (See Instructions) hysician	10 Employer (See In Blenheim Corpo				
Date	Full name of contributor	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
01/26/2009	Contributor address; City; State; Zip Code 360 Nueces Street, Condo 1515 Austin, TX 78701		\$350.00	 		
			,	Texas, complete Schedule T)		
Principal occu Attorney	pation / Job title (See Instructions)	Employer (See In McLean & How		,		
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
01/28/2009	Contributor address; City; State; Zip Code 8947 Wimberly Cove Austin, TX 78735		\$700.00	 		
			•	Texas, complete Schedule T)		
Principal occup Engineer / ho	pation / Job title (See Instructions) omemaker	Employer (See In: Bury & Partners				
Date	Full name of contributor	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
01/09/2009	Contributor address; City; State; Zip Code P.O. Box 4181 Austin, TX 78765		\$350.00	1 		
			(If travel outside of	Texas, complete Schedule T)		
	Dation / Job title (See Instructions)	Employer (See In: SXSW	<u> </u>	Texas, complete schedule 1,		
Sales Manag	ei	3/244				
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
01/26/2009	Contributor address; City; State; Zip Code 312 Blazing Star Drive Austin, TX 78737		\$100.00	 		
			(If travel outside of	Texas, complete Schedule T)		
Principal occur	pation / Job title (See Instructions)	Employer (See In	structions)			

The Instruction Guide explains how to complete this form.	1 PAGE# Schedule: 64/71 Re	port: 66/81						
2 FILER NAME Cole, Sheryl		Commission filers)						
4 Date 5 Full name of contributor ☐ out-of-state PAC (ID Tanner, Christina		n-kind contribution cription (if applicable)						
02/03/2009 6 Contributor address; City; State; Zip Code 7200 Waterline Rd. Austin, TX 78731	\$350.00 							
	(If travel outside of Texas, co	omplete Schedule T)						
9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions) Requested							
Date Full name of contributor out-of-state PAC (ID Taylor, Scott & Kim		n-kind contribution cription (if applicable)						
01/02/2009 Contributor address; City; State; Zip Code 10919 Enchanted Rock Cove Austin, TX 78726	\$700.00							
	(if travel outside of Texas, co	omplete Schedule T)						
Principal occupation / Job title (See Instructions) attorney / homemaker	Employer (See Instructions) Armbrust & Brown, L.L.P. / none							
Date Full name of contributor ☐ out-of-state PAC (ID Terkel, Thomas and Colleen	Amount of 1 contribution (\$) des	n-kind contribution cription (if applicable)						
01/27/2009 Contributor address; City; State; Zip Code 311 W 5th St, Apt 903 Austin, TX 78701	\$700.00 							
	(If travel outside of Texas, co	omplete Schedule T)						
Principal occupation / Job title (See Instructions) President / homemaker	Employer (See Instructions) Cencor Realty / none							
Date Full name of contributor ☐ out-of-state PAC (ID Terracon PAC		n-kind contribution cription (if applicable)						
02/11/2009 Contributor address; City; State; Zip Code 18001 W. 106th St. Olathe, KS 66061	\$300.00 	,						
	(if travel outside of Texas, co	omplete Schedule T)						
Principal occupation / Job title (See Instructions)	Employer (See Instructions)							
Date Full name of contributor out-of-state PAC (ID: Terrell, Robert		n-kind contribution cription (if applicable)						
02/03/2009 Contributor address; City; State; Zip Code 7629 Nutwood Pt. Fort Worth, TX 76133	\$100.00							
	(if travel outside of Texas, co	omplete Schedule T)						
Principal occupation / Job title (See Instructions)	Employer (See Instructions)							

	The Instruction	א Guide explains how to complete this form.		1 PAGE#			
					5/71 Report: 67/81		
2	FILER NAME	Cole, Sheryl		3 ACCOUNT# 00000009	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID Thomas, Donald	•	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	01/27/2009	6 Contributor address; City; State; Zip Code 1506 West Lynn Austin, TX 78703		\$350.00	 		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup attorney	ation / Job title (See Instructions)	10 Employer (See In Clark, Thomas				
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	01/22/2009	Contributor address; City; State; Zip Code P.O. BOX 29119 Austin, TX 78755		\$350.00	{ 		
				<u>l. ' </u>	Texas, complete Schedule T)		
	Principal occup broker	ation / Job title (See Instructions)	Employer (See In Durhman & Bas				
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	01/08/2009	Contributor address; City; State; Zip Code 3114 Wheeler St. Austin, TX 78705		\$350.00	} { {		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	1 '	Texas, complete sendedie 17		
	Teacher	anony oob title (ood mottadans)	Acton School of		***		
	Date	Full name of contributor ut-of-state PAC (ID Torres, Vincent	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	01/10/2009	Contributor address; City; State; Zip Code 6904 Winterberry Dr. Austin, TX 78750		\$350.00	 		
				(if travel outside of	Texas, complete Schedule T)		
	Principal occup Research Eng	ation / Job title (See Instructions) jineer	Employer (See In UT	structions)			
•	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	03/03/2009	Contributor address; City; State; Zip Code 3106 Lookout Lane Austin, TX 78746		\$350.00	(
				(If travel outside of	Texas, complete Schedule T)		
	Principal occur	ation / Job title (See Instructions)	Employer (See In:	<u> </u>			
	President	(222 ///2003/00/	La Corsha Hosp				

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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 66	6/71 Report: 68/81		
2	FILER NAME	Cole, Sheryl		3 ACCOUNT # 00000009	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Tynberg, Alexander	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	03/24/2009	6 Contributor address; City; State; Zip Code 3712 Meredith St. Austin, TX 78703		\$100.00	 		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	02/03/2009	Contributor address; City; State; Zip Code 3001 Bonnie Rd. Austin, TX 78703		\$200.00	 		
			İ	(If travel outside of	Texas, complete Schedule T)		
	Principal occur	pation / Job title (See Instructions)	Employer (See In	<u> </u>	Toxas, complete ochodale 17		
	Senior Projec		Hicks Co.				
	Date	Full name of contributor ☐ out-of-state PAC (ID# Wallace, Lisa)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	03/17/2009	Contributor address; City; State; Zip Code 4327 N Roseneath Dr. Houston, TX 77021		\$100.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (If applicable)		
	02/15/2009	Contributor address; City; State; Zip Code 5014 Flaming Oak Cove Austin, TX 78749		\$350.00	! ! !		
				(if travel outside of	Texas, complete Schedule T)		
	Principal occup Pharmacist	ation / Job title (See Instructions)	Employer (See In: 38th St. Pharma	structions)			
	Date	Full name of contributor ut-of-state PAC (ID# Warth, Daniel)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	01/01/2009	Contributor address; City; State; Zip Code 2716 Rio Mesa Dr. Austin, TX 78732		\$200.00	[
	,			(If travel outside of	Texas, complete Schedule T)		
	•	ation / Job title (See Instructions)	Employer (See Ins	<u> </u>			
Vice President			URS				

The Instructi	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 67	771 Report: 69/81		
2 FILER NAME	Cole, Sheryl		3 ACCOUNT # 00000009	(Ethics Commission filers)		
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID) Waters, Ronald And Jacqueline	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
01/27/2009	6 Contributor address; City; State; Zip Code 6800 Waters Way Austin, TX 78737		\$700.00	 		
			(If travel outside of	Texas, complete Schedule T)		
	pation / Job title (See Instructions) nager / Student	10 Employer (See In TSMC / None	structions)			
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
03/28/2009	Contributor address; City; State; Zip Code 515 Congress Ave., Ste 1270 P.O. Drawer 1329 Austin, TX 78767		\$350.00	 		
	Austri, 17/6/6/		(If travel outside of	Texas, complete Schedule T)		
Principal occu	Dation / Job title (See Instructions)	Employer (See In	<u> </u>	· · · · · · · · · · · · · · · · · · ·		
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
02/28/2009	Contributor address; City; State; Zip Code 2911 Kassarine Pass Austin, TX 78704-4628		\$100.00	 		
			(If travel outside of	Texas, complete Schedule T)		
Principal occur	Dation / Job title (See Instructions)	Employer (See In	l '	Toxas, complete control 1,		
	,	, , , , ,	,			
Date	Full name of contributor	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
02/08/2009	Contributor address; City; State; Zip Code 7304 Geneva Dr. Austin, TX 78723		\$100.00	l 		
			(If travel outside of	Texas, complete Schedule T)		
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)			
Date	Full name of contributor ☐ out-of-state PAC (ID# White, Michael	,)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
03/25/2009	Contributor address; City; State; Zip Code 3435 Shiraz Loop Round Rock, TX 78665		\$350.00) 		
			(If travel outside of	Texas, complete Schedule T)		
Principal occup Vice Preside	nt	Employer (See In: Journeyman Co				

	The Instruction	אס GUIDE explains how to complete this form.		1 PAGE # Schedule: 68	/71 Report: 70/81
2	FILER NAME	Cole, Sheryl		3 ACCOUNT# 00000009	(Ethics Commission filers)
4	Date	5 Full name of contributor out-of-state PAC (ID: Whitfield, Gail and Marcus	*)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	01/27/2009	6 Contributor address; City; State; Zip Code 1520 Ben Crenshaw Way, Apt 221 Austin, TX 78746-6169	•••••	\$700.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Owners	ation / Job title (See Instructions)	10 Employer (See In The Whitfield C		
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	01/06/2009	Contributor address; City; State; Zip Code 1517 Alameda Austin, TX 78704		\$350.00	l
				<u> </u>	Texas, complete Schedule T)
	Principal occup Analyst	ation / Job title (See Instructions)	Employer (See In State of Texas	structions)	
	Date	Full name of contributor ☐ out-of-state PAC (ID# Wilcox, Rachael Mardegian and Scott	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	01/09/2009	Contributor address; City; State; Zip Code 2507 Cascade Dr. Austin, TX 78757		\$700.00	
				(if travel outside of	Texas, complete Schedule T)
		ation / Job title (See Instructions) / Administrative	Employer (See In SHW / Leander		
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	01/27/2009	Contributor address; City; State; Zip Code 4008 Knollwood Dr. Austin, TX 78731		\$350.00	
				(if travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In: Requested	structions)	
	Date	Full name of contributor ut-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	01/13/2009	Contributor address; City; State; Zip Code 111 Elm Street Austin, TX 78703		\$100.00	 - -
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	

ļ					
	The Instruction	N GUIDE explains how to complete this form.		1 PAGE # Schedule: 69	/71 Report: 71/81
2	FILER NAME	Cole, Sheryl		3 ACCOUNT# 00000009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Williams, Quentin & Lydia	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	01/27/2009	6 Contributor address; City; State; Zip Code 1600 S. Elbert Ct. Superior, CO 80027		\$700.00	! !
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Engineer / ho	ation / Job title (See Instructions) memaker	10 Employer (See In MWH / none	structions)	
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	03/24/2009	Contributor address; City; State; Zip Code 3103 Honey Tree Lane Austin, TX 78746-6723		\$100.00	1 -
				,	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
-	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	02/19/2009	Contributor address; City; State; Zip Code 7304 Via Correto Dr. Austin, TX 78749		\$150.00	
				Manual autolda af	Towar complete Schoolule T
	District const	attack the title (One had well and	Freeland (Cools	l -	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Winetroub, Jerald and Sandra	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)
i	01/27/2009	Contributor address; City; State; Zip Code 515 Congress Avenue, Suite 2230 Austin, TX 78701		\$700.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup President / in	ation / Job title (See Instructions) vestor	Employer (See In: Jerald Winetrou	structions) b Co. / Jerald Wir	netroub Co.
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	02/06/2009	Contributor address; City; State; Zip Code 3924 Conference Cove Austin, TX 78730		\$350.00	
				//f temus) subside =4	Tayon complete S-badula Ti
	Principal secur	ation / lab title /San Instructions)	Employer (See le		Texas, complete Schedule T)
	Homemaker	ation / Job title (See Instructions)	Employer (See In: None	structions)	

	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 70)/71 Report: 72/81		
2	FILER NAME	Cole, Sheryl		3 ACCOUNT# 00000009	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID≴ Wooley, John C.	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	01/31/2009	6 Contributor address; City; State; Zip Code 3609 Arrowhead Dr. Austin, TX 78731		\$350.00	 		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Engineer	ation / Job title (See Instructions)	10 Employer (See In Fugro Consulta				
	Date	Full name of contributor	/)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	01/14/2009	Contributor address; City; State; Zip Code 4100 Jackson Ave. #7 Austin, TX 78731		\$250.00	! 		
				(If travel outside of	Texas, complete Schedule T)		
-		ation / Job title (See Instructions)	Employer (See In				
	attorney		Wright & Green	niii			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	01/06/2009	Contributor address; City; State; Zip Code 403 Mill Pond Path Georgetown, TX 78633		\$100.00	! !		
				<u> </u>	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	01/06/2009	Contributor address; City; State; Zip Code 100 Skyline Dr. Austin, TX 78746-3609		\$700.00	 		
				(If travel outside of	Texas, complete Schedule T)		
		ation / Job title (See Instructions) eveloper / psychologist	Employer (See In Zydeco Develor				
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	02/03/2009	Contributor address; City; State; Zip Code 7315 Scenic Brk Dr Austin, TX 78736	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$700.00	! 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Vice Presiden	ation / Job title (See Instructions)	Employer (See In: Pate Engineers				
	VICE FIESIUEI	ICT FIOGGOWING	i ate Engineers	, 110116	1		

The Instruction Guide explains how to complete this form.					/71 Report: 73/81
2	FILER NAME	Cole, Sheryl		3 ACCOUNT # 00000009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID#Zarbock, Kent & Lora)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	02/03/2009	6 Contributor address; City; State; Zip Code 7105 w Rim Dr Austin, TX 78731		\$100.00	 -
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In:	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	02/18/2009	Contributor address; City; State; Zip Code 17205 Tobermory Dr. Pflugerville, TX 78660		\$200.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Taxi Driver	ation / Job title (See Instructions)	Employer (See In: Lone Star Cab	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	02/20/2009	Contributor address; City; State; Zip Code 405 W. 14th St. Austin, TX 78701		\$300.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup attorney	ation / Job title (See Instructions)	Employer (See in: Adams & Zottar		
	Date	Full name of contributor uut-of-state PAC (ID# Zuniga, Manuel and Jane)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	01/12/2009	Contributor address; City; State; Zip Code 1726 Glencliff Drive Austin, TX 78704		\$500.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Real Estate /	ation / Job title (See Instructions) Housewife	Employer (See Ins Self / None	structions)	

OF EXPENDITURE

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name

POLITICAL EXPENDITURES

SCHEDULE F

			IDITURE CATE		······································		
Advertising Expe Accounting/Bank	ing Legal Services Solicitation/Fundrais						ie
Consulting Exper Event Expense		everage Expense Expense	Travel In District Travel Out Of D		Contributions/	Donations Made By Officeholder/Political Committe	
Fees Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) The INSTRUCTION GUIDE explains how to complete this form.							
1 PAGE#		2 FILER NAME	SUIDE explains no	ow to complete this to	orm.	3 ACCOUNT # (TEC	filore\
Schedule: 1/7 Re	port: 74/81	Cole, Sheryl				00000009	iliers)
4 Date	5 Payee name					1 0000000	
03/03/2009	AT&T						
6 Amount (\$)	7 Payee addres	ss City; State;	Zip Code				
\$181.28	555 Main St Beaumont,						
	beaumont,	1277701					
8	(a) Category (Se	e Categories listed at the top of	of this schedule)	(b) Description	(If travel outside	of Texas, complete Schedule	тлП
PURPOSE	(-,		,	telephone	(1) 1) 21 21 21 21 21 21 21 21 21 21 21 21 21		· ·
OF EXPENDITURE							
9 Complete ONLY if direct expenditure	Candidate / C	Officeholder name		Office so	ught:	Office held:	
to benefit C/OH							
Date	Payee name						
03/11/2009	Butts, David						
Amount (\$)	Payee addres	• · · ·	Zip Code				
\$4,500.00	1914 Patton Austin, TX						
	Augun, 17.	10120					
	Category (Se	e Categories listed at the top of	of this schedule)	Description	(If travel outside	of Texas, complete Schedule	T) [T]
PURPOSE					npaign consu		
OF EXPENDITURE							
						0.00	
Complete ONLY if direct expenditure	Candidate / C	officeholder name		Office so	ught:	Office held:	ĺ
to benefit C/OH							
Date	Payee name						
03/05/2009	Capitol Area	Progressive Democrati					
Amount (\$)	Payee addres	• • • •	Zip Code				j
\$260.00	P.O. Box 80 Austin, TX						
	100,						
	Category (Se	e Categories listed at the top of	of this schedule)	Description	(If travel outside	of Texas, complete Schedule	т) П
PURPOSE OF	.	•	•	Donation	•	•	_
EXPENDITURE							
	0 111 10			0/5		06	
Complete ONLY if direct expenditure	Candidate / O	fficeholder name		Office so	ught:	Office held:	
to benefit C/OH							
Date	Payee name						
01/25/2009	Central Mari						
Amount (\$)	Payee addres	• • • • • • • • • • • • • • • • • • • •	Zip Code				
\$121.78	4001 N. Lan Austin, TX						
· ·		• •					l
	Category (Se	e Categories listed at the top o	f this schedule)	Description	(If travel outside	of Texas, complete Schedule	Τ
PURPOSE	• • •	-	•	food for eve	•	•	_

food for event

Office sought:

Office held:

8

PURPOSE

OF EXPENDITURE

Complete ONLY if

direct expenditure to benefit C/OH

02/06/2009 Amount (\$)

\$31.88

Date

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

City; State; Zip Code

Candidate / Officeholder name

1601 Trapelo Rd., Ste. 329 Waltham, MA 02451

Payee name Constant Contact

Payee address

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

Office held:

Email list management

Office sought:

POLITICAL EXPENDITURES

SCHEDULE F

Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ting Legal Services Solicitation/Fundralsing Expense Transportation nse Food/Beverage Expense Travel In District Contributions/D Polling Expense Travel Out Of District Candidate/O		Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) orm.			
PAGE #	2 FILER NAME		3 ACCOUNT # (TEC filers)			
hedule: 2/7 Re	Onla Ohamil		0000009			
Date	5 Payee name					
02/24/2009	City of Austin					
Amount (\$)	7 Payee address City; State; Zip	Code	, , , - · · · ·			
\$500.00						
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this s	(b) Description Filing Fee	(If travel outside of Texas, complete Schedule T)			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office so	ught: Office held:			
Date	Payee name					
03/16/2009	Cole, Sheryl					
Amount (\$)	Payee address City; State; Zip	Code				
\$5,000.00	4101 Wildwood Austin Austin, TX 78722					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this s	chedule) Description Loan Repay	(If travel outside of Texas, complete Schedule T) /ment			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office so	ught: Office held:			
Date	Payee name					
01/07/2009	Constant Contact					
Amount (\$)	Payee address City; State; Zip	Code				
\$31.88	1601 Trapelo Rd., Ste. 329 Waltham, MA 2451					

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description Email list ma	•	s, complete Schedule T}
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sou	ught;	Office held:

POLITICAL EXPENDITURES

SCHEDULE F

		_	
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ing Legal Services Solicitation/Fund	Contract Labor raising Expense Transportatio Contributions strict Candidate (Rental Expense OTHER (enter	nent/Reimbursement n Equipment & Related Expense //Donations Made By //Difficeholder/Political Committee or a category not listed above)
1 PAGE # Schedule: 3/7 Re	2 FILER NAME Cole, Sheryl		3 ACCOUNT # (TEC filers) 00000009
4 Date 03/01/2009	5 Payee name Constant Contact		
6 Amount (\$) \$31.88	7 Payee address City; State; Zip Code 1601 Trapelo Rd., Ste. 329 Waltham, MA 2451		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schadule)	(b) Description (If travel outsid Email list management	e of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 03/04/2009	Payee name Costco		
Amount (\$) \$149.37	Payee address City; State; Zip Code 10401 Research Blvd Austin, TX 78759		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outsid Event Expenses	e of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 01/06/2009	Payee name Harry, Susan		
Amount (\$) \$1,500.00	Payee address City; State; Zip Code 2520 Longview St., Ste. 211 Austin, TX 78705		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outsid fundraising consulting	e of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 01/16/2009	Payee name Harry, Susan		
Amount (\$)	Payee address City; State; Zip Code		
\$3,000.00	2520 Longview St., Ste. 211 Austin, TX 78705		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outsid fundraising consulting	e of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

POLITICAL EXPENDITURES

SCHEDULE F

Advertising Expense Accounting/Banking Event Expense

EXPENDITURE CATEGORIES Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

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

Loan Repayment/Reimbursement Transportation Equipment & Related Expense OTHER (enter a category not listed above)

Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Fees Printing Expense Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. 2 FILER NAME 1 PAGE# 3 ACCOUNT # (TEC filers) Cole, Sheryl Schedule: 4/7 Report: 77/81 00000009 4 Date 5 Payee name Harry, Susan 02/06/2009 6 Amount (\$) Payee address City; State; Zip Code 2520 Longview St., Ste. 211 \$3,000.00 Austin, TX 78705 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** fundraising consulting OF EXPENDITURE 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Pavee name 03/04/2009 Harry, Susan Amount (\$) Payee address City; State; Zip Code 2520 Longview St., Ste. 211 Austin, TX 78705 \$3,000.00 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** fundraising consulting **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Kelly Graphics 02/04/2009 Amount (\$) Payee address City; State; Zip Code 1322 Lost Creek Blvd. Austin, TX 78746 \$1,382.41 Description (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) **PURPOSE** printing OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Pavee name 03/17/2009 Kelly Graphics Payee address Amount (\$) City; State; Zip Code 1322 Lost Creek Blvd. \$1,239.77 Austin, TX 78746 Description (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) PURPOSE printing OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH

8

Complete ONLY if direct expenditure to benefit C/OH

03/11/2009

Candidate / Officeholder name

McDonald, Stephanie

Payee name

POLITICAL EXPENDITURES

SCHEDULE F

Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ting Legal Services Solicitation/Fundraising Expense Transportation Equipment & Related Expense					
PAGE# Schedule: 5/7 Re	2 FILER NAME		3 ACCOUNT # (TEC filers) 00000009			
Date 01/08/2009	5 Payee name McDonald, Stephanie					
3 Amount (\$)	7 Payee address City; State; Zip Code					
\$1,500.00	7					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside General campaign consul	of Texas, complete Schedule T)			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:			
Date	Payee name					
02/06/2009	McDonald, Stephanie					
Amount (\$) \$1,500.00	Payee address City; State; Zip Code PO Box 4101 Austin, TX 78765					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside General campaign consul	of Texas, complete Schedule T) [
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:			
Date 03/04/2009	Payee name McDonald, Stephanie					
Amount (\$)	Payee address City; State; Zip Code					
\$1,500.00	PO Box 4101 Austin, TX 78765					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside General campaign consul	of Texas, complete Schedule T) ting			

Amount (\$) \$1,500.00	Payee address City; State; Zip Code PO Box 4101 Austin, TX 78765	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) General campaign consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:

Office sought:

Office held:

POLITICAL EXPENDITURES

SCHEDULE F

Advertising Expense

Gifts/Awards/Memorial Expense

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor

Loan Repayment/Reimbursement

Accounting/Bank Consulting Expe Event Expense Fees	pense Food/Beverage Expense Travel In District Polling Expense Travel Out Of District Printing Expense Office Overhead/Rental Expense		rict ental Expense	OTHER (enter a ca	itions Made By eholder/Political C	ommittee	
		The Instruction	GUIDE explains how	to complete this fo	orm.		
1 PAGE#	I	FILER NAME			3	ACCOUNT #	(TEC filers)
Schedule: 6/7 Re	Sport. Foroi	Cole, Sheryl				00000009	
4 Date 02/24/2009	5 Payee name Pat Crow Trust F	und					
6 Amount (\$)	7 Payee address	City; State	; Zip Code				
\$500.00	1801 Palmwood Austin, TX 7875	Cove 7					
8 PURPOSE OF	(a) Category (See Cate	agories listed at the top	of this schedule)	(b) Description donation	(If travel outside of T	exas, complete S	chedule T) 🔲
EXPENDITURE							
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Office	nolder name		Office so	ught:	Office held:	
Date	Payee name			· <u>-</u>			
03/30/2009	Paypal						
Amount (\$)	Payee address	City; State	; Zip Code	<u>-</u>			
\$439.43	P.O. Box 7022 Box Mountain View,	CA 94039					
PURPOSE OF	Category (See Cate	egories listed at the top	of this schedule)	Description credit card f	(If travel outside of T ees for reporting		chedule T)
EXPENDITURE							
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officet	nolder name		Office so	ught:	Office held:	
Date	Payee name						
01/20/2009	Ranes, Jim						
Amount (\$)	Payee address	City; State	; Zip Code				
\$124.95	1501 Barton Spr Austin, TX 7870	ings #233 4					
PURPOSE OF	Category (See Cate	egories listed at the top	of this schedule)	Description graphic des	(If travel outside of T ign	exas, complete S	chedule T)
EXPENDITURE							
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officel	nolder name		Office so	ught:	Office held:	
Date	Payee name			_			
01/29/2009	Ranes, Jim						
Amount (\$)	Payee address	City; State	; Zip Code	_			
\$184.95	1501 Barton Spr Austin, TX 7870	ings #233 4					
PURPOSE OF EXPENDITURE	Category (See Cate	egories listed at the top	of this schedule)	Description graphic des	(If travel outside of T ign	exas, complete S	chedule T)
3,1, 2,1,011,011,2			<u></u>				
Complete ONLY if direct expenditure to henefit C/OH	Candidate / Officet	nolder name		Office so	ught:	Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

Advertising Expense

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor

Accounting/Bank	Accounting/Banking Legal Services Solicitation/Fundraising Expense Trans Consulting Expense Food/Beverage Expense Travel In District Ca Event Expense Polling Expense Travel Out Of District Ca		nt/Reimbursement equipment & Related Expense onations Made By ficeholder/Political Committee category not listed above)
1 PAGE#	2 FILER NAME		3 ACCOUNT # (TEC filers)
Schedule: 7/7 Re	port: 80/81 Cole, Sheryl		00000009
4 Date	5 Payee name		
02/19/2009	USPS		
6 Amount (\$)	7 Payee address City; State; Zip Code		
\$84.00	Downtown Station Austin, TX 78701		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside o postage	fTexas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 03/13/2009	Payee name USPS		
Amount (\$)	Payee address City; State; Zip Code		
\$84.00	Downtown Station Austin, TX 78701		
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel outside o postage	f Texas, complete Schedule T)
OF EXPENDITURE			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 03/13/2009	Payee name Worley		
Amount (\$)	Payee address City; State; Zip Code		
\$4,195.81	3217 North Ih 35 Austin, TX 78722		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside o yardsigns	f Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

TEXT ANNOTATION Cole, Sheryl

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Information entered by filer as a memo

Schedule A

Rancho Garza LTD. contribution was returned on 8/11/2010.

Sheryl Cole

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: Kirk Rudy

Address: 2111 Highgrove Terrace, Austin, TX 78703

Name of person soliciting

contributions: Michael Whellan

Address: 4600 Laurel Canyon Drive, Austin, TX 78731

Name of person soliciting contributions: Jeff Howard

Address: 1004 Mopac Circle, Suite 100, Austin, TX 78735

Name of person soliciting contributions: Trey Salinas

Address: 1221 So Mopac Expy, Ste 115, Austin, TX 78746

Name of person soliciting contributions: William Reagan

Address: 4100 McBrine Place, Austin, TX 78746

Name of person soliciting contributions: Soloman Kassa

Address: 2958 Donnell Drive, Austin, TX 78664

Name of person soliciting contributions: Karen Friese

Address: 6603 Cat Creek Trail, Austin, TX 78731