

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed: 10
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <u>MR</u> FIRST <u>ERIC</u> MI <u>J</u> NICKNAME LAST SUFFIX <u>PANGOL</u>	<div style="border: 1px solid black; padding: 5px;"> <p style="text-align: center; margin: 0;">OFFICE USE ONLY</p> <p>Date Received 2011 APR 14 PM 4 08</p> <p style="text-align: right; font-weight: bold;">AUSTIN CITY CLERK RECEIVED</p> <p>Date Hand-delivered or Postmarked</p> <p>Receipt # <u>111</u> Amendment</p> <p>Date Processed</p> <p>Date Imaged</p> </div>	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <u>PO BOX 18233 AUSTIN, TX 78760</u>		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION <u>(512) 736-7887</u>		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR <u>MR</u> FIRST <u>KEATHE</u> MI NICKNAME LAST SUFFIX <u>BASKOP</u>		
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <u>1540 FM 1325 #736 AUSTIN, TX 78728</u>		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION <u>(512) 393-4261</u>		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year <u>12 / 01 / 2010 04 / 14 / 2011</u>		
11 ELECTION	ELECTION DATE Month Day Year <u>05 / 14 / 2011</u>	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) <u>AUSTIN CITY COUNCIL</u>	
14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS	<p style="font-size: small;">DIRECT CAMPAIGN EXPENDITURES ARE CAMPAIGN EXPENDITURES MADE BY OTHERS WITHOUT THE CANDIDATE'S PRIOR CONSENT OR APPROVAL. CANDIDATES ARE REQUIRED TO DISCLOSE THIS INFORMATION ONLY IF THEY RECEIVE NOTIFICATION OF THE DIRECT CAMPAIGN EXPENDITURE.</p> <p>Name</p> <p>Address / PO Box; Apt. / Suite #; City; State; Zip Code</p>		
<input type="checkbox"/> additional pages			

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

15 C/OH NAME

16 ACCOUNT # (Ethics Commission Filers)

17 NOTICE FROM POLITICAL COMMITTEE(S)

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

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

SPECIFIC

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

additional pages

18 CONTRIBUTION TOTALS

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

\$

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

\$

1200.⁰⁰

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$

4. TOTAL POLITICAL EXPENDITURES

\$

3,912.84

CONTRIBUTION BALANCE

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

\$

281.82

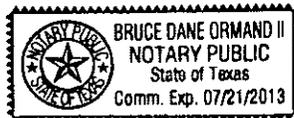
OUTSTANDING LOAN TOTALS

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

\$

19 AFFIDAVIT

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



[Handwritten Signature]
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said ERIC J. RANGEL, this the 14th day of April, 20 11, to certify which, witness my hand and seal of office.

[Handwritten Signature]
Signature of officer administering oath

BRUCE DANE ORMAND II
Printed name of officer administering oath

Notary Public
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 4	
2 FILER NAME ERIC J. FANGAL		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 1.11.11	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) DANE ORMAND	7 Amount of contribution (\$) 45.⁰⁰	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code AUSTIN, TX		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 1.11.11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) MATT RUSSO	Amount of contribution (\$) 100.⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code AUSTIN, TX		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 1.11.11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) LOGAN RODRIGUEZ	Amount of contribution (\$) 100.⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code AUSTIN, TX		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 1.28.11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) JEB ROYT	Amount of contribution (\$) 50.⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code AUSTIN, TX		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 2.6.11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) PITA GARCIA	Amount of contribution (\$) 50.⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code AUSTIN, TX		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <u>4</u>	
2 FILER NAME <u>APRIL S. PANFILI</u>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <u>2.7.11</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>BRUCE ORMAND</u>	7 Amount of contribution (\$) <u>250.⁰⁰</u>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <u>AUSTIN, TX</u>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <u>2.8.11</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>CORY GEORGE</u>	Amount of contribution (\$) <u>20.⁰⁰</u>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <u>AUSTIN, TX</u>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <u>2.7.11</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>APRIL BESAN</u>	Amount of contribution (\$) <u>20.⁰⁰</u>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <u>AUSTIN, TX</u>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <u>2.14.11</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>SALWINDRA HALL</u>	Amount of contribution (\$) <u>20.⁰⁰</u>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <u>AUSTIN, TX</u>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <u>2.15.11</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>DOLORES SCHEETZ</u>	Amount of contribution (\$) <u>100.⁰⁰</u>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <u>AUSTIN, TX</u>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: **4**

2 FILER NAME **ERIC J. PANZEL**

3 ACCOUNT # (Ethics Commission Filers)

4 Date **2.15.11**

5 Full name of contributor out-of-state PAC (ID#: _____)
LORI PANZEL - POMPK

7 Amount of contribution (\$) **20.00**

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
LOCKHART, TX 78644

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date **2.18.11**

Full name of contributor out-of-state PAC (ID#: _____)
BAURAK ASKARI

Amount of contribution (\$) **20.00**

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
AUSTIN, TX

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date **2.22.11**

Full name of contributor out-of-state PAC (ID#: _____)
HEATHER BISHOP

Amount of contribution (\$) **20.00**

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
AUSTIN, TX

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date **2.23.11**

Full name of contributor out-of-state PAC (ID#: _____)
OLGA MALDONADO

Amount of contribution (\$) **40.00**

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
AUSTIN, TX

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date **2.24.11**

Full name of contributor out-of-state PAC (ID#: _____)
THOMAS SCHATZ

Amount of contribution (\$) **40.00**

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
WYLLIE, TX

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: 4

2 FILER NAME ERIC J. RANDEL

3 ACCOUNT # (Ethics Commission Filers)

4 Date 2.24.11

5 Full name of contributor out-of-state PAC (ID#: _____)
STEVEN SALAZAR

7 Amount of contribution (\$) 20.⁰⁰

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
AUSTIN, TX

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date 3.10.11

Full name of contributor out-of-state PAC (ID#: _____)
KATYA SMITH

Contributor address; City; State; Zip Code
HOUSTON, TX

Amount of contribution (\$) 25.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 4.13.11

Full name of contributor out-of-state PAC (ID#: _____)
KRISTY DUMA

Contributor address; City; State; Zip Code
ALBUQUERQUE, NM

Amount of contribution (\$) 100.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Contributor address; City; State; Zip Code

Amount of contribution (\$)

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Contributor address; City; State; Zip Code

Amount of contribution (\$)

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 1.28.11	5 Payee name FAD EX
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6 Amount (\$) 23.25	7 Payee address; City; State; Zip Code AUSTIN, TX
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) ADVERTISING EXPENSE	(b) Description (If travel outside of Texas, complete Schedule T)
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 1.29.11	Payee name HAB
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Amount (\$) 91.78	Payee address; City; State; Zip Code AUSTIN, TX
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) FOOD/BEVERAGE EXPENSE	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 3.9.11	Payee name JACK BURTON
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Amount (\$) 300. ⁰⁰	Payee address; City; State; Zip Code KYLE, TX
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) EVENT EXPENSE	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 3.13.11	Payee name CITY OF AUSTIN
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Amount (\$) 500	Payee address; City; State; Zip Code AUSTIN, TX
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) FEES	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
4 Date 1.11.11	5 Payee name ONION CREEK CLUB	
6 Amount (\$) 1,104. ⁰⁰ <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code AUSTIN, TX 7	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) EVENT EXPENSE	(b) Description (If travel outside of Texas, complete Schedule T)
Date 1.28.11	Payee name WAL MART	
Amount (\$) 8.66 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code AUSTIN, TX	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) DECORATION	Description (If travel outside of Texas, complete Schedule T) FOR AN EVENT
Date 1-28-11	Payee name ACE MART	
Amount (\$) 31.23 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code AUSTIN, TX	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) DECORATION	Description (If travel outside of Texas, complete Schedule T) FOR AN EVENT
Date 2.26.11	Payee name THE BELMONT	
Amount (\$) 475 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code AUSTIN, TX	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) EVENT EXPENSE	Description (If travel outside of Texas, complete Schedule T)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:		2 FILER NAME		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 12.14.10		5 Payee name USPS TO PROXES			
6 Amount (\$) 24.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code WASHINGTON DC			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) OTHER (MAIL)		(b) Description (If travel outside of Texas, complete Schedule T)	
Date 12.14.10		Payee name EODADDY.COM			
Amount (\$) 90.02 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code AZ			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) ADVERTISING / WEBSITE		Description (If travel outside of Texas, complete Schedule T)	
Date 12.22.10		Payee name SANCE REYES PHOTOGRAPHY			
Amount (\$) 700.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code AUSTIN, TX			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) ADVERTISING / PHOTOS		Description (If travel outside of Texas, complete Schedule T)	
Date 12.30.10		Payee name GOT PRINT.COM			
Amount (\$) 36.24 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code CA			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) ADVERTISING		Description (If travel outside of Texas, complete Schedule T)	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 3.11.11	5 Payee name KELLY GRAPHICS
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6 Amount (\$) 927.66	7 Payee address; City; State; Zip Code AUSTIN, TX
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Reimbursement from political contributions intended

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) PRINTING EXPENSE	(b) Description (If travel outside of Texas, complete Schedule T)
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Date	Payee name
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Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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Date	Payee name
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Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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Date	Payee name
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Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

AUSTIN CITY CLERK
RECEIVED

2011 APR 14 PM 4 08

EXEMPTION STATEMENT PER 2-2-26
(To be used only when no electronic filing of a
Campaign Finance Report (C&E) will be done)

NAME OF CANDIDATE OR COMMITTEE:

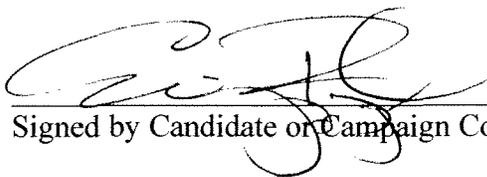
RANGEL ERIC J
(Last) (First) (Middle)

ADDRESS: 1500 E. RIVERSIDE DRIVE Austin Tx 78741

DATE OF FILING: 4.14.11

STATEMENT

I/we, ERIC J. RANGEL (Name of Candidate or Committee), have not raised and do not intend to raise more than \$30,000 in contributions for the campaign period of JANUARY, 20 11 through MAY 14, 20 11. Therefore, I/we will not be filing our election contribution and expenditure reports (C&E) electronically. If contributions raised exceed \$30,000, I/we will file subsequent Campaign Finance Reports (C&E) electronically.


Signed by Candidate or Campaign Committee

4-13-11
Date

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