

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME Tovo, Kathrynne (Ms.)

15 ACCOUNT # (Ethics Commission filers)
00005000

16 NOTICE FROM POLITICAL COMMITTEE(S)

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

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

17 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED **\$ 20.00**

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) **\$ 44,885.00**

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED **\$ 0.00**

4. TOTAL POLITICAL EXPENDITURES **\$ 14,528.13**

CONTRIBUTION BALANCE

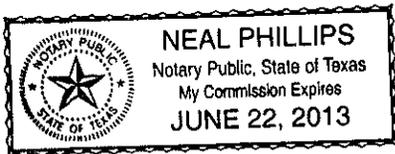
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD **\$ 70,489.77**

OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE 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.



Kathrynne B Tovo
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said ^{NBP} Kathrynne B Tovo, this the 12 day of April, 2011, to certify which, witness my hand and seal of office.

Neal Phillips
Signature of officer administering oath

NEAL PHILLIPS
Print name of officer administering oath

FSR, Public Notary
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/51 Report: 4/66	
2 FILER NAME Tovo, Kathryne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 03/26/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Anderson-Ewing, Kristy (Ms.) 6 Contributor address; City; State; Zip Code 1008 S. 5th St. Austin, TX 78704	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 03/31/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Antrobus, Sally (Ms.) Contributor address; City; State; Zip Code 526 Surf Oaks Dr. Seabrook, TX 77586	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) *Book Author/Editor		Employer (See Instructions) Self	
Date 04/04/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Armstrong, Gail (Mr.) Contributor address; City; State; Zip Code 911 Daniel Dr. Austin, TX 78704	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 03/12/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Atherton, Lorraine (Ms.) Contributor address; City; State; Zip Code 2009 Arpdale Austin, TX 78704	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) **Copy Editor		Employer (See Instructions) Self	
Date 04/04/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bailey, Heather (Ms.) Contributor address; City; State; Zip Code 1500 Raleigh Ave Austin, TX 78703	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/51 Report: 5/66	
2 FILER NAME Tovo, Kathryne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 04/04/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Balaka, Gerald (Mr.) 6 Contributor address; City; State; Zip Code 1807 W 34th St Austin, TX 78703	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 03/23/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Basciano, Joyce (Ms.) Contributor address; City; State; Zip Code 1907 W 34th St. Austin, TX 78703	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 04/04/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bello, John (Mr.) Contributor address; City; State; Zip Code 1804 W 37th Austin, TX 78731	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 04/04/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Blakeslee, Lynda (Ms.) Contributor address; City; State; Zip Code 2814 Inridge Dr. Austin, TX 78745	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) *Manager		Employer (See Instructions) Central Health	
Date 03/19/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Blythe, Sharon (Ms.) Contributor address; City; State; Zip Code 9206 Brigadoon Cove Austin, TX 78750	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Self	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/51 Report: 6/66	
2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 04/02/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Blythe, Sharon (Ms.) 6 Contributor address; City; State; Zip Code 9206 Brigadoon Cove Austin, TX 78750	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) CPA		10 Employer (See Instructions) Self	
Date 04/02/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bridges, Barbara (Ms.) Contributor address; City; State; Zip Code 1106 W 22 1/2 St Austin, TX 78705	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 04/04/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brookshire, Laura (Ms.) Contributor address; City; State; Zip Code 3908 Glasgow Dr. Austin, TX 78749	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 03/28/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brown, Sharon (Ms.) Contributor address; City; State; Zip Code 4213 Ave. F Austin, TX 78751	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 03/30/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bunch, William (Mr.) Contributor address; City; State; Zip Code 1307 Oxford Ave Austin, TX 78704	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Save Our Springs Alliance	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/51 Report: 8/66	
2 FILER NAME Tovo, Kathryne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 03/12/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Campbell, Sarah (Ms.) 6 Contributor address; City; State; Zip Code 1201 Woodland Ave Austin, TX 78704	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable) <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions) *Retired		10 Employer (See Instructions) N/A	
Date 04/02/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Carlson, Michelle (Ms.) Contributor address; City; State; Zip Code 903 W 31st Austin, TX 78705	Amount of contribution (\$) \$35.00	In-kind contribution description (if applicable) <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 03/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Castillo, Y.R. (Mr.) Contributor address; City; State; Zip Code 606 South 3rd St Austin, TX 78704	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 04/01/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cathcart, Mark (Mr.) Contributor address; City; State; Zip Code 605 W Johanna St. Austin, TX 78704	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 03/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cavendish, Kimber (Ms.) Contributor address; City; State; Zip Code 300 Academy Austin, TX 78704	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) *Owner/Manager		Employer (See Instructions) Kimber Modern	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/51 Report: 9/66	
2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 03/30/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chavez, Dora (Ms.) 6 Contributor address; City; State; Zip Code P.O. Box 13141 Austin, TX 78711	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Model		10 Employer (See Instructions) Self	
Date 03/28/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chenoweth, Dale (Mr.) Contributor address; City; State; Zip Code 1413 Newton St Austin, TX 78704	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 03/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chimenti, Danette (Ms.) Contributor address; City; State; Zip Code 200 The Circle Austin, TX 78704	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) *Consultant		Employer (See Instructions) Self	
Date 03/12/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chimenti, Edward (Mr.) Contributor address; City; State; Zip Code 4531 Cedar Ridge Tr. Houston, TX 77059	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) *Retired		Employer (See Instructions) N/A	
Date 03/14/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chimenti, Jeff (Mr.) Contributor address; City; State; Zip Code 87 West Mirror Ridge Circle The Woodlands, TX 77382	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) *MD		Employer (See Instructions) Texas ENT Specialists	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME Tovo, Kathryne (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00005000

4 Date **5** Full name of contributor out-of-state PAC (ID# _____)
03/12/2011 Chimenti, Katie (Ms.)

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

6 Contributor address; City; State; Zip Code
4531 Cedar Ridge Tr.
Houston, TX 77059

\$350.00

(If travel outside of Texas, complete Schedule T)

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

10 Employer (See Instructions)
N/A

Date Full name of contributor out-of-state PAC (ID# _____)
04/02/2011 Christian, William (Mr.)

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

Contributor address; City; State; Zip Code
2108 Wright St
Austin, TX 78704

\$200.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Graves Daugherty LLP

Date Full name of contributor out-of-state PAC (ID# _____)
03/11/2011 Clark, Colin (Mr.)

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

Contributor address; City; State; Zip Code
302 W Johanna
Austin, TX 78704

\$350.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
*Environmental Activist

Employer (See Instructions)
Save Our Springs

Date Full name of contributor out-of-state PAC (ID# _____)
04/02/2011 Clarke, Linda (Ms.)

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

Contributor address; City; State; Zip Code
5307 Badger Bend
Austin, TX 78749

\$50.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
03/11/2011 Clayton, Billy (Mr.)

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

Contributor address; City; State; Zip Code
2909 Oak Lane Dr.
Austin, TX 78704

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
**

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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1 PAGE #
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2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00005000

4 Date
04/01/2011

5 Full name of contributor out-of-state PAC (ID# _____)
Cohen-Burton, Carol (Ms.)

6 Contributor address; City; State; Zip Code
4200 Ave G
Austin, TX 78751

7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable)
\$350.00 |

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)
Artist

10 Employer (See Instructions)
Self

Date
04/04/2011

Full name of contributor out-of-state PAC (ID# _____)
Coldiron, Ron (Mr.)

Contributor address; City; State; Zip Code
6509 Marblewood
Austin, TX 78731

Amount of contribution (\$) | In-kind contribution description (if applicable)
\$50.00 |

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/27/2011

Full name of contributor out-of-state PAC (ID# _____)
Coldwell, Matt (Mr.)

Contributor address; City; State; Zip Code
710 W Gibson
Austin, TX 78704

Amount of contribution (\$) | In-kind contribution description (if applicable)
\$50.00 |

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/28/2011

Full name of contributor out-of-state PAC (ID# _____)
Conley, John (Mr.)

Contributor address; City; State; Zip Code
702 Cardinal Ln C2
Austin, TX 78704

Amount of contribution (\$) | In-kind contribution description (if applicable)
\$125.00 |

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/28/2011

Full name of contributor out-of-state PAC (ID# _____)
Conley, Stacey (Ms.)

Contributor address; City; State; Zip Code
702 Cardinal Ln C2
Austin, TX 78704

Amount of contribution (\$) | In-kind contribution description (if applicable)
\$125.00 |

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 10/51 Report: 12/66	
2 FILER NAME Tovo, Kathryne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 03/28/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Conner, David (Mr.) 6 Contributor address; City; State; Zip Code 4709 Duval St Austin, TX 78751	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable) <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 04/01/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Conner, David (Mr.) Contributor address; City; State; Zip Code 4709 Duval St Austin, TX 78751	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 04/02/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Crossley, Cecilia (Ms.) Contributor address; City; State; Zip Code 3100 Catalina Dr. Austin, TX 78741	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 03/12/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Crow, Steven (Mr.) Contributor address; City; State; Zip Code 3018 W Ave. Austin, TX 78705	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 04/02/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Curry, Michael (Mr.) Contributor address; City; State; Zip Code 211 E 7th St Suite 920 Austin, TX 78701	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
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2 FILER NAME Tovo, Kathryne (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00005000

4 Date 03/26/2011

5 Full name of contributor out-of-state PAC (ID# _____)
Daniel, Harold (Mr.)

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

6 Contributor address; City; State; Zip Code
3203 Cupid Dr.
Austin, TX 78735

\$350.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)
Systems Analyst

10 Employer (See Instructions)
Optimization Alternatives

Date 03/12/2011

Full name of contributor out-of-state PAC (ID# _____)
Danninger, Brent (Mr.)

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

Contributor address; City; State; Zip Code
1001 W 17th St
Austin, TX 78701

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 04/04/2011

Full name of contributor out-of-state PAC (ID# _____)
Deal, Eric (Mr.)

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

Contributor address; City; State; Zip Code
10703 McFarlie Cove
Austin, TX 78750

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 04/04/2011

Full name of contributor out-of-state PAC (ID# _____)
Deal, Monica (Ms.)

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

Contributor address; City; State; Zip Code
10703 McFarlie Cove
Austin, TX 78750

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 04/04/2011

Full name of contributor out-of-state PAC (ID# _____)
Dealey, Amanda (Ms.)

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

Contributor address; City; State; Zip Code
5401 Ridge Oak Dr.
Austin, TX 78731

\$350.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
N/A

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
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2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00005000

4 Date
04/04/2011

5 Full name of contributor out-of-state PAC (ID# _____)
Dobson, Donald (Mr.)

6 Contributor address; City; State; Zip Code
11519 Trinity Hill Dr.
Austin, TX 78753

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

\$100.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date
03/28/2011

Full name of contributor out-of-state PAC (ID# _____)
Dofis, George (Mr.)

Contributor address; City; State; Zip Code
704 W Gibson
Austin, TX 78704

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

\$350.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
N/A

Date
04/04/2011

Full name of contributor out-of-state PAC (ID# _____)
Donovan, Brian (Mr.)

Contributor address; City; State; Zip Code
508 Genard St
Austin, TX 78751

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

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
04/04/2011

Full name of contributor out-of-state PAC (ID# _____)
Douglas, Pamela (Ms.)

Contributor address; City; State; Zip Code
1702 S. Lamar #7
Austin, TX 78704

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

\$40.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
04/04/2011

Full name of contributor out-of-state PAC (ID# _____)
Duncan, James (Mr.)

Contributor address; City; State; Zip Code
360 Nueces Suite 2701
Austin, TX 78701

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

\$350.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
City Planner

Employer (See Instructions)
Duncan Associates

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00005000

4 Date
03/29/2011

5 Full name of contributor out-of-state PAC (ID# _____)
Faust, Sarah (Ms.)

6 Contributor address; City; State; Zip Code
821 E. 53rd St
Austin, TX 78751

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

\$150.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date
03/11/2011

Full name of contributor out-of-state PAC (ID# _____)
Faust, Vicki (Ms.)

Contributor address; City; State; Zip Code
300 Academy Dr.
Austin, TX 78704

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

\$350.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
*CPA/Owner

Employer (See Instructions)
Tax Trailer

Date
04/02/2011

Full name of contributor out-of-state PAC (ID# _____)
Fusco, Sarah (Ms.)

Contributor address; City; State; Zip Code
1307 Oxford Ave
Austin, TX 78704

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

\$60.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/29/2011

Full name of contributor out-of-state PAC (ID# _____)
Gaebler, Helen (Ms.)

Contributor address; City; State; Zip Code
504 Harris Ave
Austin, TX 78705

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

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
04/02/2011

Full name of contributor out-of-state PAC (ID# _____)
George, Mary (Ms.)

Contributor address; City; State; Zip Code
4314 Ave G
Austin, TX 78751

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

\$50.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 16/51 Report: 18/66	
2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 03/12/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gibbs, Carol (Ms.) 6 Contributor address; City; State; Zip Code 1602 Roberts Ave Austin, TX 78704	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Neighborhood Advisor		10 Employer (See Instructions) City of Austin	
Date 03/12/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gibbs, Ellen (Ms.) Contributor address; City; State; Zip Code 1701 S. 6th Austin, TX 78704	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 03/28/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Girard, Denise (Ms.) Contributor address; City; State; Zip Code 4520 Red River St Austin, TX 78751	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 03/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Goff, Gayle (Ms.) Contributor address; City; State; Zip Code 1106 Upland Dr Austin, TX 78741	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) *Bookkeeper		Employer (See Instructions) Self	
Date 03/28/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gonzalez, Ruben (Mr.) Contributor address; City; State; Zip Code 3804 Ave H Austin, TX 78751	Amount of contribution (\$) \$20.00	In-kind contribution description (if applicable) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 17/51 Report: 19/66

2 FILER NAME Tovo, Kathryne (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00005000

4 Date
04/04/2011

5 Full name of contributor out-of-state PAC (ID# _____)
Goodman, Kim (Ms.)

6 Contributor address; City; State; Zip Code
4416 Sam Bass Rd.
Round Rock, TX 78681

7 Amount of contribution (\$) | **8** In-kind contribution description (if applicable)
\$100.00 |

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date
04/02/2011

Full name of contributor out-of-state PAC (ID# _____)
Goodrich, Raymond (Mr.)

Contributor address; City; State; Zip Code
1404 Redbud Tr
Austin, TX 78746

Amount of contribution (\$) | In-kind contribution description (if applicable)
\$200.00 |

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
N/A

Date
04/04/2011

Full name of contributor out-of-state PAC (ID# _____)
Googins, Benjamin (Mr.)

Contributor address; City; State; Zip Code
2520 E 3rd St A
Austin, TX 78702

Amount of contribution (\$) | In-kind contribution description (if applicable)
\$25.00 |

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/30/2011

Full name of contributor out-of-state PAC (ID# _____)
Gordon, William (Mr.)

Contributor address; City; State; Zip Code
6103 Cary Dr.
Austin, TX 78757

Amount of contribution (\$) | In-kind contribution description (if applicable)
\$100.00 |

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
04/02/2011

Full name of contributor out-of-state PAC (ID# _____)
Goss, Delwin (Mr.)

Contributor address; City; State; Zip Code
6410 Ponca St
Austin, TX 78741

Amount of contribution (\$) | In-kind contribution description (if applicable)
\$50.00 |

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 18/51 Report: 20/66	
2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 04/04/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Graham, Ann (Ms.) 6 Contributor address; City; State; Zip Code 3815 Ave H Austin, TX 78751	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 03/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gravois, Richard (Mr.) Contributor address; City; State; Zip Code 1402 Kinney Ave Austin, TX 78704	Amount of contribution (\$) \$10.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 03/19/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Greenberg, Betsy (Ms.) Contributor address; City; State; Zip Code 3009 Washington Sq. Austin, TX 78705	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 03/28/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Griffin, Teresa (Ms.) Contributor address; City; State; Zip Code 1111 Woodland Ave Austin, TX 78704	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) *Architect		Employer (See Instructions) Self	
Date 03/29/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Guerrero, Linda (Ms.) Contributor address; City; State; Zip Code 3204 Fairfax Walk Austin, TX 78705	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 19/51 Report: 21/66	
2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 04/04/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Guerrero, Linda (Ms.) 6 Contributor address; City; State; Zip Code 3204 Fairfax Walk Austin, TX 78705	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Consultant		10 Employer (See Instructions) Self	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 04/04/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Guntakala, Anantha (Mr.) Contributor address; City; State; Zip Code 10305 Dianella Ln Austin, TX 78759	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Software Specialist		Employer (See Instructions) Varian Medical Systems	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 04/04/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Guntakala, Chandra (Ms.) Contributor address; City; State; Zip Code 10305 Dianella Ln Austin, TX 78759	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Self	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 04/04/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harding, Rebecca (Ms.) Contributor address; City; State; Zip Code 3907 Burr Oak Ln Austin, TX 78727	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 03/28/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harper, Jeffrey (Mr.) Contributor address; City; State; Zip Code 805 W 16th Street Austin, TX 78701	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 20/51 Report: 22/66	
2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 04/02/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harris, August (Mr.) 6 Contributor address; City; State; Zip Code 1901 W 35th Austin, TX 78703	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 04/04/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harwood, Dianne (Ms.) Contributor address; City; State; Zip Code 2520 Gate Ridge Dr. Austin, TX 78748	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 04/04/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Heinen, Anne (Ms.) Contributor address; City; State; Zip Code 3010 Washington Sq. Austin, TX 78705	Amount of contribution (\$) \$10.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 03/12/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Heinzen, Dan (Mr.) Contributor address; City; State; Zip Code 3007 West Ave Austin, TX 78705	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 03/31/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Held, Theodore (Mr.) Contributor address; City; State; Zip Code 1908 Cliff St. Austin, TX 78705	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 21/51 Report: 23/66

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00005000

4 Date
04/02/2011

5 Full name of contributor out-of-state PAC (ID# _____)
Holderness, Earl (Mr.)

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

6 Contributor address; City; State; Zip Code
2943 Thousand Oaks Dr.
Austin, TX 78746

\$100.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date
04/02/2011

Full name of contributor out-of-state PAC (ID# _____)
Holderness, Macy (Ms.)

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

Contributor address; City; State; Zip Code
2943 Thousand Oaks Dr.
Austin, TX 78746

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/28/2011

Full name of contributor out-of-state PAC (ID# _____)
Holt, Angero (Mr.)

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

Contributor address; City; State; Zip Code
930 E 53 1/2 St
Austin, TX 78751

\$10.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/28/2011

Full name of contributor out-of-state PAC (ID# _____)
Hornaday, Raina (Ms.)

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

Contributor address; City; State; Zip Code
908 W 18th St
Austin, TX 78701

\$175.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/28/2011

Full name of contributor out-of-state PAC (ID# _____)
Hornaday, Walter (Mr.)

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

Contributor address; City; State; Zip Code
908 W 18th St
Austin, TX 78701

\$175.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 22/51 Report: 24/66	
2 FILER NAME Tovo, Kathryne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 03/11/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) House, Kathleen (Ms.) 6 Contributor address; City; State; Zip Code 1503 Inglewood Austin, TX 78741	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) *Executive Assistant		10 Employer (See Instructions) Casey Gentz & Bayliff LLP	
Date 04/01/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Howard, Jo Sue (Ms.) Contributor address; City; State; Zip Code 1801 West Ave. Austin, TX 78701	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) Seton Family of Hospitals	
Date 04/04/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hurt, Jan (Ms.) Contributor address; City; State; Zip Code P.O. Box 1927 Abingdon, VA 24212	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self	
Date 03/31/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hurt, John (Mr.) Contributor address; City; State; Zip Code 4510 Ave. F Austin, TX 78751	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Store Owner		Employer (See Instructions) Accentric	
Date 04/04/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hurt, Jun (Ms.) Contributor address; City; State; Zip Code 1209 Newning Austin, TX 78704	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Administrative Assistant		Employer (See Instructions) University of Texas	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 23/51 Report: 25/66	
2 FILER NAME Tovo, Kathryne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 04/04/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hurt, Sam (Mr.) 6 Contributor address; City; State; Zip Code P.O. Box 1927 Abingdon, VA 24212	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Attorney		10 Employer (See Instructions) Self	
Date 04/04/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hurt III, Sam (Mr.) Contributor address; City; State; Zip Code 1209 Newning Austin, TX 78704	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Graphic Designer, Animator		Employer (See Instructions) Self	
Date 03/12/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hyatt, Gary (Mr.) Contributor address; City; State; Zip Code 1804 Eva Street Austin, TX 78704	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) *IT Consultant		Employer (See Instructions) Eva Street Consulting	
Date 03/12/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ingle, Mary (Ms.) Contributor address; City; State; Zip Code 3406 Duval Street Austin, TX 78705	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) **Clothes Designer		Employer (See Instructions) Inglewear	
Date 03/21/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Iverson, Richard (Mr.) Contributor address; City; State; Zip Code 506 West 34th Austin, TX 78705	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 24/51 Report: 26/66	
2 FILER NAME Tovo, Kathryne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 04/02/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jack, Jamie (Mr.) 6 Contributor address; City; State; Zip Code 625 South 45th St Boulder, CO 80305	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Owner		10 Employer (See Instructions) Tesoros Trading Co.	
Date 04/01/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jimenez, Kisla (Ms.) Contributor address; City; State; Zip Code 3012 West Ave. Austin, TX 78705	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Tesoros Trading Co.	
Date 04/02/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Johnson, D'Ann (Ms.) Contributor address; City; State; Zip Code 1604 East 11th St Austin, TX 78702	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 03/31/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Johnston, Nina (Ms.) Contributor address; City; State; Zip Code 1402 Redway Ln Houston, TX 77062	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) *Homemaker		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) *Homemaker		Employer (See Instructions) N/A	
Date 03/31/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Johnston, Smith (Mr.) Contributor address; City; State; Zip Code 1402 Redway Ln Houston, TX 77062	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) *Physician/Flight Surgeon		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) *Physician/Flight Surgeon		Employer (See Instructions) NASA	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 26/51 Report: 28/66	
2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 03/12/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) King, Bryan (Mr.) 6 Contributor address; City; State; Zip Code 1809 Lightsey Rd. Austin, TX 78704	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) **Broadcasting		10 Employer (See Instructions) Self	
Date 03/12/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) King, Jan (Ms.) Contributor address; City; State; Zip Code 1809 Lightsey Rd. Austin, TX 78704	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) **Counselor		Employer (See Instructions) Self	
Date 03/12/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kiolbassa, Jolene (Ms.) Contributor address; City; State; Zip Code 3007 West Ave. Austin, TX 78705	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Homemaker	
Date 03/28/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kirk, Saundra (Ms.) Contributor address; City; State; Zip Code 2117 Clifton St. Austin, TX 78704	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 04/04/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kitchen, Ann (Ms.) Contributor address; City; State; Zip Code 2401 Briargrove Austin, TX 78704	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) H&CS	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 27/51 Report: 29/66	
2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 04/02/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Krames, Christy Kay (Ms.) 6 Contributor address; City; State; Zip Code 1802 Vance Cir Austin, TX 78701	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 04/04/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kyle, Catherine (Ms.) Contributor address; City; State; Zip Code 2700 Mountain Laurel Ln Austin, TX 78703	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 03/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Land, Linda (Ms.) Contributor address; City; State; Zip Code 1106 Upland Austin, TX 78741	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) *Bookkeeper		Employer (See Instructions) Salling & Levbarg, PLLC	
Date 04/02/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Langenberg, Ray (Mr.) Contributor address; City; State; Zip Code 1802 Vance Cir Austin, TX 78701	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 04/04/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lee, Carol (Ms.) Contributor address; City; State; Zip Code 3506 Far View Dr. Austin, TX 78730	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 28/51 Report: 30/66	
2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 04/04/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lewis, Dawn (Ms.) 6 Contributor address; City; State; Zip Code 4509 Edgemont Dr, Austin, TX 78731	7 Amount of contribution (\$) \$175.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 04/04/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lewis, Fred (Mr.) Contributor address; City; State; Zip Code 4509 Edgemont Dr, Austin, TX 78731	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 03/12/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lewis, Kevin (Mr.) Contributor address; City; State; Zip Code 1002 Bouldin Ave Austin, TX 78704	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) **Buyer		Employer (See Instructions) Whole Earth Provision Co.	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 03/28/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lipscombe, John (Mr.) Contributor address; City; State; Zip Code 6600 Mesa Dr. Austin, TX 78731	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 04/02/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Llanes, Daniel (Mr.) Contributor address; City; State; Zip Code 4907 Red Bluff Rd., Austin, TX 78702	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 29/51 Report: 31/66	
2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 04/04/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Loo, James (Mr.) 6 Contributor address; City; State; Zip Code 812 Rutherford Place Austin, TX 78704	7 Amount of contribution (\$) \$175.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 04/04/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Loo, Jason (Mr.) Contributor address; City; State; Zip Code 812 Rutherford Place Austin, TX 78704	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 03/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lowe, Claudette (Ms.) Contributor address; City; State; Zip Code 400 Academy Dr. Austin, TX 78704	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) *Real Estate Agent		Employer (See Instructions) Moreland Realty	
Date 03/31/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Luckey, Alan (Mr.) Contributor address; City; State; Zip Code P.O. Box 3332 Bellaire, TX 77402	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) *Creative Director		Employer (See Instructions) Gotham Image Works	
Date 03/31/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Luckey, Mary (Ms.) Contributor address; City; State; Zip Code P.O. Box 3332 Bellaire, TX 77402	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) *Government Employee		Employer (See Instructions) NASA	

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2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 04/02/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lupa, Paul (Mr.) 6 Contributor address; City; State; Zip Code 903 W 31st Austin, TX 78705	7 Amount of contribution (\$) \$35.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) **Software Programmer		10 Employer (See Instructions) Neon Enterprise Software	
Date 03/15/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Maclaine, Nancy (Ms.) Contributor address; City; State; Zip Code 2302 Del Curto Rd Austin, TX 78704	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) **Software Programmer		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) **Software Programmer		Employer (See Instructions) Neon Enterprise Software	
Date 03/23/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Maclaine, Nancy (Ms.) Contributor address; City; State; Zip Code 2302 Del Curto Rd Austin, TX 78704	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) **Software Programmer		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) **Software Programmer		Employer (See Instructions) Neon Enterprise Software	
Date 03/28/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) MacNeilage, Linda (Ms.) Contributor address; City; State; Zip Code 606 Harthan St Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Psychologist		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self	
Date 03/29/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Madden, Louise (Ms.) Contributor address; City; State; Zip Code 12405 Mossback Cove Austin, TX 78739	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Compensation Consultant		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Compensation Consultant		Employer (See Instructions) City of Austin	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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

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2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00005000

4 Date 03/28/2011

5 Full name of contributor out-of-state PAC (ID# _____)
Majors, Sharon (Ms.)

6 Contributor address; City; State; Zip Code
3811 Ave. G
Austin, TX 78751

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

\$10.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date 04/04/2011

Full name of contributor out-of-state PAC (ID# _____)
Mancill, Kirk (Mr.)

Contributor address; City; State; Zip Code
4510 Avenue F
Austin, TX 78751

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

\$25.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 03/31/2011

Full name of contributor out-of-state PAC (ID# _____)
Martinez, Narda (Ms.)

Contributor address; City; State; Zip Code
4510 Avenue F
Austin, TX 78751

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

\$350.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Store Owner

Employer (See Instructions)
Avenue Gallery

Date 03/11/2011

Full name of contributor out-of-state PAC (ID# _____)
Mather, Jean (Ms.)

Contributor address; City; State; Zip Code
1611 Alameda Dr.
Austin, TX 78704

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

\$350.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
*Retired

Employer (See Instructions)
N/A

Date 03/12/2011

Full name of contributor out-of-state PAC (ID# _____)
Mathews, Eiloa (Ms.)

Contributor address; City; State; Zip Code
2610 Friar Tuck Ln.
Austin, TX 78704

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

\$350.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
**Writer/Tutor

Employer (See Instructions)
Self

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME Tovo, Kathryne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 03/23/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Maxwell, Mary Gay (Ms.) 6 Contributor address; City; State; Zip Code 111 Laurel Ln Austin, TX 78705	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Retired		10 Employer (See Instructions) N/A	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 04/02/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Maxwell, Mary Gay (Ms.) Contributor address; City; State; Zip Code 111 Laurel Ln Austin, TX 78705	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 04/02/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McCarver, Bo (Mr.) Contributor address; City; State; Zip Code 1719 Manor Rd Austin, TX 78722	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Social Anthropologist		Employer (See Instructions) Self	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 03/28/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McCormick, Donna Beth (Ms.) Contributor address; City; State; Zip Code 5703 Shoalwood Ave. Austin, TX 78756	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 03/12/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McDaniel, Marc (Mr.) Contributor address; City; State; Zip Code 811 W 31st Austin, TX 78705	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

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2 FILER NAME Tovo, Kathrynne (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 03/28/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McGraw, Karen (Ms.) 6 Contributor address; City; State; Zip Code 4315 Avenue C Austin, TX 78751	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable)	
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)	
Date 04/04/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McGraw, Karen (Ms.) Contributor address; City; State; Zip Code 4315 Avenue C Austin, TX 78751	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)	
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date 04/02/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McGray, Judith (Ms.) Contributor address; City; State; Zip Code 5327 Western Hills Dr. Austin, TX 78731	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)	
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Owner			Employer (See Instructions) McGray&McGray Land Surveyors	
Date 03/12/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Meier, Michael (Mr.) Contributor address; City; State; Zip Code 2009 Arpdale Austin, TX 78704	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable)	
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Retired Engineer			Employer (See Instructions) N/A	
Date 03/29/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Meisenbach, Albert (Mr.) Contributor address; City; State; Zip Code 1800 San Gabriel St. Austin, TX 78701	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)	
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Physician			Employer (See Instructions) UT Student Health Center	

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The INSTRUCTION GUIDE explains how to complete this form.

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2 FILER NAME Tovo, Kathryne (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00005000

4 Date 04/02/2011 5 Full name of contributor out-of-state PAC (ID# _____)
Mishra, Sanjay (Mr.)

6 Contributor address; City; State; Zip Code
3200 W. Avenue
Austin, TX 78705

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

\$25.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date 04/04/2011 Full name of contributor out-of-state PAC (ID# _____)
Mitchell, Catherine (Ms.)

Contributor address; City; State; Zip Code
1702 S. Lamar
#7
Austin, TX 78704

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

\$50.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 04/02/2011 Full name of contributor out-of-state PAC (ID# _____)
Mitchell, Kirk (Mr.)

Contributor address; City; State; Zip Code
P.O. Box 4023
Austin, TX 78765

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

\$350.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Investor

Employer (See Instructions)
Self

Date 03/18/2011 Full name of contributor out-of-state PAC (ID# _____)
Moore, Catherine (Ms.)

Contributor address; City; State; Zip Code
3802 Avenue H
Austin, TX 78751

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

\$175.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
N/A

Date 03/29/2011 Full name of contributor out-of-state PAC (ID# _____)
Moore, Catherine (Ms.)

Contributor address; City; State; Zip Code
3802 Avenue H
Austin, TX 78751

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

\$175.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
N/A

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2 FILER NAME Tovo, Kathryne (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00005000		
4 Date 03/18/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moore, John (Mr.) 6 Contributor address; City; State; Zip Code 3802 Avenue H Austin, TX 78751		7 Amount of contribution (\$) \$175.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Retired			10 Employer (See Instructions) N/A		
Date 03/29/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moore, John (Mr.) Contributor address; City; State; Zip Code 3802 Avenue H Austin, TX 78751		Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Retired			Employer (See Instructions) N/A		
Date 04/04/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morrison, Susan (Ms.) Contributor address; City; State; Zip Code 4205 Ramsey Avenue Austin, TX 78756		Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 03/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morrow, D.J. (Ms.) Contributor address; City; State; Zip Code 504 Terrace Dr. Austin, TX 78704		Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) *Artist			Employer (See Instructions) Self		
Date 04/04/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mueller, Elizabeth (Ms.) Contributor address; City; State; Zip Code 3213 French Place Austin, TX 78722		Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		

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2 FILER NAME Tovo, Kathryne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 04/04/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Oden, Michael (Mr.) 6 Contributor address; City; State; Zip Code 3213 French Place Austin, TX 78722	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions)			
Date 04/02/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) O'Hanlon, Lou (Ms.) Contributor address; City; State; Zip Code 7212 Marywood Cir Austin, TX 78723	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date 03/30/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Overton, Roscoe (Mr.) Contributor address; City; State; Zip Code 1701 E. 21st Austin, TX 78722	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date 03/28/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Palaima, Carolyn (Ms.) Contributor address; City; State; Zip Code 505 E. 40th St Austin, TX 78751	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date 03/31/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pascoe, Susan (Ms.) Contributor address; City; State; Zip Code 2502 Hartford Rd. Austin, TX 78703	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			

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2 FILER NAME Tovo, Kathryne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 03/11/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Patterson, Bradford (Mr.) 6 Contributor address; City; State; Zip Code 1311 Newton St. Austin, TX 78704	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 03/12/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Penn, Beverly (Ms.) Contributor address; City; State; Zip Code 811 W 31st St Austin, TX 78705	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Artist/Homemaker		Employer (See Instructions) Self	
Date 03/28/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Phillips, Russell (Mr.) Contributor address; City; State; Zip Code 6901 Glen Ridge Austin, TX 78731	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 04/01/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Piedmont-Marton, Elisabeth (Ms.) Contributor address; City; State; Zip Code 3901 Glasgow Dr. Austin, TX 78749	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 03/31/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pinnelli, Janis (Ms.) Contributor address; City; State; Zip Code 2001 Exposition Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) J. Pinnelli Co.	

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2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 03/31/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pinnelli, Joseph (Mr.) 6 Contributor address; City; State; Zip Code 2001 Exposition Austin, TX 78703	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) General Contractor		10 Employer (See Instructions) J. Pinnelli Co.	
Date 04/04/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pool, Leslie (Ms.) Contributor address; City; State; Zip Code 4503 Shoal Creek Blvd. Austin, TX 78756	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 04/01/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Powell, Stella (Ms.) Contributor address; City; State; Zip Code 1300 West Lynn Suite 106 Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Business Consultant		Employer (See Instructions) Self	
Date 03/31/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Radjef, Tara (Ms.) Contributor address; City; State; Zip Code 2311 S. 2nd St Austin, TX 78704	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 04/04/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rather, Robin (Ms.) Contributor address; City; State; Zip Code 805 Ethel St. Austin, TX 78704	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 03/11/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Read-Orr, Bookie (Ms.) 6 Contributor address; City; State; Zip Code 908 B Post Oak St. Austin, TX 78704	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Accountant		10 Employer (See Instructions) D&S Residential Services	
Date 03/28/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reynolds, Caroline (Ms.) Contributor address; City; State; Zip Code 2611 W 49th St Austin, TX 78731	Amount of contribution (\$) \$125.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 03/28/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reynolds, Joseph (Mr.) Contributor address; City; State; Zip Code 2611 W 49th St Austin, TX 78731	Amount of contribution (\$) \$125.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 03/28/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Richter, Dorothy (Ms.) Contributor address; City; State; Zip Code 3901 Avenue G Austin, TX 78751	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 04/02/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rigney, Robert (Mr.) Contributor address; City; State; Zip Code 1902 Anita Dr. Austin, TX 78704	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Drafter		Employer (See Instructions) Self	

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SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 41/51 Report: 43/66	
2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 04/02/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rigney, Robert (Mr.) 6 Contributor address; City; State; Zip Code 1902 Anita Dr. Austin, TX 78704	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Drafter		10 Employer (See Instructions) Self	
Date 04/04/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Roa, Ruby (Ms.) Contributor address; City; State; Zip Code 611 Terrell Hill Dr. Austin, TX 78704	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 03/28/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Robinson, Edward (Mr.) Contributor address; City; State; Zip Code 2614 Pembroke Tr Austin, TX 78731	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) University of Texas at Austin	
Date 03/28/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Robinson, Priscilla (Ms.) Contributor address; City; State; Zip Code 2614 Pembroke Tr Austin, TX 78731	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self	
Date 04/01/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rodgers, Brian (Mr.) Contributor address; City; State; Zip Code 1112 W 9th Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Real Estate Developer		Employer (See Instructions) Self	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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

1 PAGE #
Schedule: 43/51 Report: 45/66

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00005000

4 Date
03/30/2011

5 Full name of contributor out-of-state PAC (ID# _____)
Seeger, Patricia (Ms.)

6 Contributor address; City; State; Zip Code
6705 Winterberry Dr.
Austin, TX 78750

7 Amount of contribution (\$) | **8** In-kind contribution description (if applicable)
\$150.00 |

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date
03/22/2011

Full name of contributor out-of-state PAC (ID# _____)
Sheff, Gregory (Mr.)

Contributor address; City; State; Zip Code
902 W 31st St
Austin, TX 78705

Amount of contribution (\$) | In-kind contribution description (if applicable)
\$100.00 |

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/28/2011

Full name of contributor out-of-state PAC (ID# _____)
Sittler, Wolf (Mr.)

Contributor address; City; State; Zip Code
1403 Kenwood Ave
Austin, TX 78704

Amount of contribution (\$) | In-kind contribution description (if applicable)
\$100.00 |

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/12/2011

Full name of contributor out-of-state PAC (ID# _____)
Sorenson-Hyatt, Kristie (Ms.)

Contributor address; City; State; Zip Code
1804 Eva St
Austin, TX 78704

Amount of contribution (\$) | In-kind contribution description (if applicable)
\$350.00 |

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
*Realtor/Broker

Employer (See Instructions)
Self

Date
03/12/2011

Full name of contributor out-of-state PAC (ID# _____)
Speer, Jack (Mr.)

Contributor address; City; State; Zip Code
1704 Briar St
Austin, TX 78704

Amount of contribution (\$) | In-kind contribution description (if applicable)
\$100.00 |

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
**

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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

1 PAGE #
Schedule: 45/51 Report: 47/66

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00005000

4 Date **5** Full name of contributor out-of-state PAC (ID# _____)
04/04/2011 Stevens, Stephen (Mr.)

6 Contributor address; City; State; Zip Code
1619 W 14th St
Austin, TX 78703

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

\$150.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
04/04/2011 Stott, William (Mr.)

Contributor address; City; State; Zip Code
1818 Vance Cir
Austin, TX 78701

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

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
03/12/2011 Stoughton, Bill (Mr.)

Contributor address; City; State; Zip Code
3200 South Oak Dr.
Austin, TX 78704

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

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
04/04/2011 Stuart, Jen (Ms.)

Contributor address; City; State; Zip Code
2404 Rock Terrace Cir
Austin, TX 78704

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

\$25.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
03/29/2011 Swaffar, Bob (Mr.)

Contributor address; City; State; Zip Code
906 West 17th St
Austin, TX 78701

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

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 46/51 Report: 48/66	
2 FILER NAME Tovo, Kathryne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 04/02/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Taniguchi, Evan (Mr.) 6 Contributor address; City; State; Zip Code 1609 West 6th St Austin, TX 78703	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable) <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions) Architect		10 Employer (See Instructions) Taniguchi Architects	
Date 03/12/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tassin, Jay (Mr.) Contributor address; City; State; Zip Code 1001 West 17th St. Austin, TX 78701	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) .		Employer (See Instructions)	
Date 03/29/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Team, Lin (Ms.) Contributor address; City; State; Zip Code 600 Bellevue Place Austin, TX 78705	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self	
Date 03/27/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tiemann, Donna (Ms.) Contributor address; City; State; Zip Code 3203 Cupid Dr. Austin, TX 78735	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Barley & Pfeiffer Architects	
Date 03/26/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Todd, David (Mr.) Contributor address; City; State; Zip Code 1304 Mariposa Dr. #211 Austin, TX 78704	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 47/51 Report: 49/66	
2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 03/26/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Trejo, Deborah (Ms.) 6 Contributor address; City; State; Zip Code 1717 Briar St Austin, TX 78704	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Kemp Smith LLP	
4 Date 04/02/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tschurr, Betsy (Ms.) 6 Contributor address; City; State; Zip Code 3701 River Rd Austin, TX 78703	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) AISD	
4 Date 04/02/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tschurr, Mark (Mr.) 6 Contributor address; City; State; Zip Code 3701 River Rd Austin, TX 78703	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) Self	
4 Date 03/11/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Veltman, Alex (Mr.) 6 Contributor address; City; State; Zip Code 606 S 3rd St Austin, TX 78704	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
4 Date 04/04/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Waley, Roy (Mr.) 6 Contributor address; City; State; Zip Code 1310 B Palo Duro Austin, TX 78757	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Barbara Hilliard Realtors	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 48/51 Report: 50/66	
2 FILER NAME Tovo, Kathryne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 03/12/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Walton, Cory (Mr.) 6 Contributor address; City; State; Zip Code 1701 Bouldin Ave Austin, TX 78704	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) **Marketing Communications		10 Employer (See Instructions) Emerson Process Management	
Date 03/12/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Walton, Marsha (Ms.) Contributor address; City; State; Zip Code 1701 Bouldin Ave Austin, TX 78704	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) **Occupational Therapist		Employer (See Instructions) Kid Therapy	
Date 03/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Watkins, Linda (Ms.) Contributor address; City; State; Zip Code 2407 Riverside Farms Rd Austin, TX 78741	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) *Executive Assistant		Employer (See Instructions) Leslie M Howe, PC	
Date 03/30/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Watson, Catherine (Ms.) Contributor address; City; State; Zip Code 3804 Avenue H Austin, TX 78751	Amount of contribution (\$) \$20.00	In-kind contribution description (if applicable) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 03/28/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Way, Heather (Ms.) Contributor address; City; State; Zip Code 2108 Wright St Austin, TX 78704	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Attorney/Lecturer		Employer (See Instructions) University of Texas	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 49/51 Report: 51/66	
2 FILER NAME Tovo, Kathryne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 03/26/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Weed, Betty (Ms.) 6 Contributor address; City; State; Zip Code 2218 Alta Vista Ave. Austin, TX 78704	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Research		10 Employer (See Instructions) TEA	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 03/28/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Weigand, Ingrid (Ms.) Contributor address; City; State; Zip Code 704 W Gibson Austin, TX 78704	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Marketing Communications		Employer (See Instructions) Austin Energy	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 03/28/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Whatley, Bart (Mr.) Contributor address; City; State; Zip Code 907 E 37th St Austin, TX 78705	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 04/02/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) White, Sage (Ms.) Contributor address; City; State; Zip Code 1904 Kenwood Ave. Austin, TX 78704	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 03/30/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) White, Stephen (Mr.) Contributor address; City; State; Zip Code 3406 Duval St Austin, TX 78705	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) University of Texas at Austin	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 51/51 Report: 53/66	
2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 03/11/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Yevich, Elizabeth (Ms.) 6 Contributor address; City; State; Zip Code 2105 B Ann Arbor Ave. Austin, TX 78704	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) **		10 Employer (See Instructions)	
Date 04/04/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Yznaga, Mark (Mr.) Contributor address; City; State; Zip Code 2401 Briargrove Austin, TX 78704	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) H&CS	
Date 03/31/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Zaragoza, Nuria (Ms.) Contributor address; City; State; Zip Code 1908 Cliff St Austin, TX 78705	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 04/01/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Zent, Shelley (Ms.) Contributor address; City; State; Zip Code 5507 Lemonwood Dr. Austin, TX 78731	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 04/01/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Zettner, Steven (Mr.) Contributor address; City; State; Zip Code 6811 Daugherty Rd Austin, TX 78757	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense	Gifts/Awards/Memorial 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 PAGE # Schedule: 1/9 Report: 56/66		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000	
4 Date 03/22/2011		5 Payee name Austin Chronicle			
6 Amount (\$) \$749.00		7 Payee address City; State; Zip Code P.O. Box 49066 Austin, TX 78765			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> political advertisement	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 03/25/2011		Payee name AustinToner.com			
Amount (\$) \$265.21		Payee address City; State; Zip Code 13718 Cambourne Drive Pflugerville, TX 78660			
8 PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Toner for Printer	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 03/11/2011		Payee name Capitol Rubber Stamp			
Amount (\$) \$10.28		Payee address City; State; Zip Code 3314 S. Congress Ave Austin, TX 78704			
8 PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Name Badge	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 03/28/2011		Payee name Capitol Rubber Stamp			
Amount (\$) \$16.24		Payee address City; State; Zip Code 3314 S. Congress Ave Austin, TX 78704			
8 PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Deposit Stamp	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 2/9 Report: 57/66		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000	
4 Date 03/31/2011	5 Payee name Central Market				
6 Amount (\$) \$78.01	7 Payee address City; State; Zip Code 4001 N. Lamar Blvd. Austin, TX 78756				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Food for Office Opening Event		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 03/18/2011	Payee name Clarkie Hall Farmers Inc.				
Amount (\$) \$207.00	Payee address City; State; Zip Code 5818 Balcones Dr. Austin, TX 78731				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Insurance for Campaign Office		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 03/18/2011	Payee name Clarkie Hall Farmers Inc.				
Amount (\$) \$44.92	Payee address City; State; Zip Code 5818 Balcones Dr. Austin, TX 78731				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Insurance Payment for Campaign Office		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 03/23/2011	Payee name Compu Signs				
Amount (\$) \$281.45	Payee address City; State; Zip Code 632 N. Lamar Austin, TX 78703				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Banners and Signs		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 3/9 Report: 58/66		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000	
4 Date 03/27/2011	5 Payee name Costco				
6 Amount (\$) \$139.45	7 Payee address City; State; Zip Code 10401 Research Blvd. Austin, TX 78759				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Food for Campaign Office Opening		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 03/29/2011	Payee name Costco				
Amount (\$) \$173.35	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) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Food and Beverages for Campaign Office Opening		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 03/29/2011	Payee name Costco				
Amount (\$) \$149.08	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) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Office Furniture		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 03/22/2011	Payee name Fagan, Dennis (Mr.)				
Amount (\$) \$565.66	Payee address City; State; Zip Code 1601 West 38th Street #201 Austin, TX 78731				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign photography services		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 4/9 Report: 59/66		2 FILER NAME Tovo, Kathryne (Ms.)		3 ACCOUNT # (TEC filers) 00005000	
4 Date 03/23/2011		5 Payee name Michaels			
6 Amount (\$) \$4.32		7 Payee address City; State; Zip Code 3201 Bee Caves Rd Ste 112 Austin, TX 78746			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Office Supplies	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 03/31/2011		Payee name Miller, Steven (Mr.)			
Amount (\$) \$2,500.00		Payee address City; State; Zip Code 300 Crockett St #328 Austin, TX 78704			
8 PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 03/14/2011		Payee name Net Victories			
Amount (\$) \$1,750.00		Payee address City; State; Zip Code P.O. Box 5013 Austin, TX 78763			
8 PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor for Website Design/Build	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 03/12/2011		Payee name OfficeMax			
Amount (\$) \$79.97		Payee address City; State; Zip Code 907 West Fifth St Austin, TX 78703			
8 PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Leaflet Printing	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 5/9 Report: 60/66		2 FILER NAME Tovo, Kathryn (Ms.)		3 ACCOUNT # (TEC filers) 00005000	
4 Date 03/19/2011		5 Payee name OfficeMax			
6 Amount (\$) \$49.65		7 Payee address City; State; Zip Code 5451-B North IH35 Austin, TX 78723			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Office Supplies	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 03/23/2011		Payee name OfficeMax			
Amount (\$) \$90.95		Payee address City; State; Zip Code The Triangle Austin, TX 78756			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Office Supplies	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 03/24/2011		Payee name OfficeMax			
Amount (\$) \$21.43		Payee address City; State; Zip Code The Triangle Austin, TX 78756			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Office Supplies	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 03/25/2011		Payee name OfficeMax			
Amount (\$) \$71.92		Payee address City; State; Zip Code The Triangle Austin, TX 78756			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Office Supplies	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 6/9 Report: 61/66		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000	
4 Date 03/26/2011		5 Payee name OfficeMax			
6 Amount (\$) \$19.43		7 Payee address City; State; Zip Code The Triangle Austin, TX 78756			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Nametags	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 03/28/2011		Payee name OfficeMax			
Amount (\$) \$74.95		Payee address City; State; Zip Code The Triangle Austin, TX 78756			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Office Supplies	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 03/29/2011		Payee name OfficeMax			
Amount (\$) \$54.22		Payee address City; State; Zip Code 907 West Fifth Street Austin, TX 78703			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Leaflet Printing	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 04/04/2011		Payee name Paypal			
Amount (\$) \$279.98		Payee address City; State; Zip Code 2145 Hamilton Avenue San Jose, CA 95125			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit card processing fees for entire period	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 7/9 Report: 62/66	2 FILER NAME Tovo, Kathryn (Ms.)	3 ACCOUNT # (TEC filers) 00005000
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4 Date 03/31/2011	5 Payee name Pronto Food Mart
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6 Amount (\$) \$15.74	7 Payee address City; State; Zip Code 4301 Duval St. Austin, TX 78751
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Food for Campaign Office Opening Event
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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 03/17/2011	Payee name T&J Building Limited, LLP
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Amount (\$) \$10.00	Payee address City; State; Zip Code 11130 Jollyville Rd Suite #303 Austin, TX 78759
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Guaranty for Campaign Office Lease
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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 03/17/2011	Payee name T&J Building Limited, LLP
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Amount (\$) \$2,500.00	Payee address City; State; Zip Code 11130 Jollyville Rd Suite #303 Austin, TX 78759
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Office Rent
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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 03/17/2011	Payee name T&J Building Limited, LLP
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Amount (\$) \$1,500.00	Payee address City; State; Zip Code 11130 Jollyville Rd Suite #303 Austin, TX 78759
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Office Rent Security Deposit
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 8/9 Report: 63/66		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000	
4 Date 03/27/2011	5 Payee name Target				
6 Amount (\$) \$12.43	7 Payee address City; State; Zip Code 5621 N IH35 Austin, TX 78723				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Office Furniture		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 03/22/2011	Payee name Tops				
Amount (\$) \$104.46	Payee address City; State; Zip Code 1100 E. 5th Street Austin, TX 78702				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printer for campaign office and paper		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 03/24/2011	Payee name Tops				
Amount (\$) \$54.13	Payee address City; State; Zip Code 1100 E. 5th Street Austin, TX 78702				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Office Furniture		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 03/31/2011	Payee name Trujillo-Robnet, Arianna (Ms.)				
Amount (\$) \$2,000.00	Payee address City; State; Zip Code 3008 Kerbey Ln Austin, TX 78703				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 9/9 Report: 64/66		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000	
4 Date 03/15/2011		5 Payee name United Status Postal Service			
6 Amount (\$) \$22.00		7 Payee address City; State; Zip Code Central Park, West Station Austin, TX 78705			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Post Office Box Rental	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/2 Report: 65/66		2 FILER NAME Tova, Kathryne (Ms.)		3 ACCOUNT # (TEC filers) 00005000	
4 Date 03/11/2011		5 Payee name City of Austin			
6 Amount (\$) \$500.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address City; State; Zip Code 301 W Second St Austin, TX 78701			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Filing Fee	
Date 03/11/2011		Payee name GoDaddy.com			
Amount (\$) \$32.05 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code 14455 N Hayden Rd Suite 219 Scottsdale, AZ 85260			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Purchase Domain/Email	
Date 03/12/2011		Payee name GoDaddy.com			
Amount (\$) \$32.05 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code 14455 N Hayden Rd Suite 219 Scottsdale, AZ 85260			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Purchase Domain/Email	
Date 03/20/2011		Payee name OfficeMax			
Amount (\$) \$21.64 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code The Triangle Austin, TX 78756			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Office Supplies	

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 2/2 Report: 66/66		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000
4 Date 03/21/2011	5 Payee name OfficeMax			
6 Amount (\$) \$47.16 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address City; State; Zip Code The Triangle Austin, TX 78756			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Ink, leaflet printing	

SCHEDULE V - attach to form C/OH (C & E)
Reference 2-2-22, Austin City Code

PERSONS SOLICITING CONTRIBUTIONS ON YOUR BEHALF

Name of Candidate/Officeholder: Kathryn Tovo

Enter the name and address of any person who has solicited and obtained contributions on your behalf during the reporting period of \$200 per person from five or more individuals. (This requirement does not apply to an individual who raises funds in total amount of \$5,000 or less for a candidate through a fundraising event held at the individual's residence.)

Name of person soliciting contributions	Address
Danette Chimenti *	200 The Circle, Austin, TX 78704
Bryan King **	1809 Lightsey Rd, Austin, TX 78704

Reminder: This form is to identify bundlers, i.e. individuals who solicit and obtain contributions on your behalf. Remember there is a separate form to identify the *actual donors* (C/OH).

All Contributions shown on C/OH from "bundlers" are marked with asterisks as shown above in their respective employer/occupation information.