CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

Th	e C/OH Instruction Guid	DE explains how to complete this f	form.	CCOUNT # Ethics Commission filers)	2 PAGE # 1 of 37	
3	CANDIDATE /	MS / MRS / MR FIRST		МІ	OFFICE U	SE ONLY
	OFFICEHOLDER NAME	Mrs. Sheryl NICKNAME LAST Cole		SUFFIX	Date Received	AUSTIN RE
4	CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX: APT / SUITE #, P. O. Box 1564 Austin, TX 78767	CITY;	STATE: ZIP COD	1	or Date Postmarked
	Change of Address				Receipt #	CAmount
5	CAMPAIGN	MS/MRS/MR FIRST	 _		<u>_</u>	ت ت
-	TREASURER	Joseph			Date Processed	
	NAME		'' 		Date Imaged	
		NICKNAME LAST Parker	г 	SUFFIX		
6	CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); 5918 Lookout Mountain Austin, TX 78731	; APT / SUITE #;	CITY; STATE;	ZIP CODE	
7	CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBE (512) 323-6605	ER	extension		
8	REPORT TYPE		lay before election	Runoff Exceeded \$500 In	appointment (of	ampaign treasurer fficeholder only) ach C/OH - FR)
9	PERIOD	Month Day Year		Month	Day Year	
	COVERED	05/03/2012	THROUGH		2/2012	_
10	ELECTION	ELECTION DATE Month Day Year 05/12/2012	ELECTION TYPE Primary	Runoff	X General	Special
11	OFFICE	OFFICE HELD (If any)		12 OFFICE SOUGHT (II	f known)	
	GO TO PAGE 2					

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

001 1 01(1 a			OOVER	Oneen 102
13 C/OH NAME Cole	, Sheryl (Mrs.)		14 ACCOUNT # 00001564	(Ethics Commission filers)
15 NOTICE FROM	have been made wit	otice of political expenditures by political committees to support the candidate's or officeholder's knowledge or consent. Candidate by receive notice of such expenditures		
POLITICAL COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME ATCEMSEA		
	GENERAL	COMMITTEE ADDRESS 5817 Wilcab Road, Suite 3 Austin, TX 78721		
	X SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME Fitzpatrick, Bryan (Mr.)		
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS 5817 WIICAD Austin, TX 78721		
16 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	1,450.00
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	38,800.00
EXPENDITURE 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$				
	4. TOTAL	POLITICAL EXPENDITURES	\$	70,030.38
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE AY OF THE REPORTING PERIOD	\$	0.00
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE AY OF THE REPORTING PERIOD	\$	0.00
17 AFFIDAVIT				-
*****************		I swear, or affirm, under penalty is true and correct and includes me under Title 15, Election Cod	all information require	
W w	ANDY HINKLE ommission Expires July 17, 2014	My Signature of C	andidate 6r Officehole	der
AFFIX NOTARY S	STAMP / SEAL ABOV			14th
Sworn to and subscrib	, 7	tify which, witness my hand and seal of office.	, this the	/ / day
Jandes Hu	ble	Candy Hintle	Votan Pr	Sle
Signature of officer admi	nistering oath	Print name of efficer administering oath	Title of officer admin	istering oath

				<u></u>	
	The INSTRUCTION	N Guide explains how to complete this form.		1 PAGE # Schedule: 1/2	25 Report: 3/37
2	FILER NAME	Cole, Sheryi (Mrs.)	-	3 ACCOUNT# 00001564	(Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (ID#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	05/12/2012	6 Contributor address; City; State; Zip Code 4107 Medical Parkway Austin, TX 78756		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/04/2012	Contributor address; City; State; Zip Code 4106 Medical Parkway Austin, TX 78756		\$350.00	[
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/09/2012	Contributor address; City; State; Zip Code best effortts Austin, TX 78701		\$350.00	1
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Environmenta	ation / Job title (See Instructions)	Employer (See In TrieEcycling	structions)	
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/04/2012	Contributor address; City; State; Zip Code 3200 Southwest Freeway #2600 Houston, TX 77027	•••••	\$350.00]]
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	vation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/04/2012	Contributor address; City; State; Zip Code 4613 Shoalwood Ave Austin, TX 78756		\$100.00	
					Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In: UT	structions)	

(OTHER THAN PLEDGES OR LOANS							
1	The Instruction	N GUIDE explains how to complete this form.	1 PAGE # Schedule: 2/3	25 Report: 4/37				
2 F	ILER NAME	Cole, Sheryl (Mrs.)		3 ACCOUNT# 00001564	(Ethics Commission filers)			
4	Date	5 Full name of contributor ut-of-state PAC (ID# Anderson, Richard	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
0	5/09/2012	6 Contributor address; City; State; Zip Code 3600 N. Capital of Tx Hsy Bldg. B, Suite 250 Austin, TX 78746		\$350.00	 			
				L'	Texas, complete Schedule T)			
9 P	rincipal occup	ation / Job title (See Instructions)	10 Employer (See In best efforts	structions)				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
05	5/04/2012	Contributor address; City; State; Zip Code 600 Travis #4200 Houston, TX 77002		\$350.00				
	deeleel ee	-ti / Jah Ailla (Can Jacks Aillann)	Feedland (Co. La	<u></u>	Texas, complete Schedule T)			
۲	nncipal occup	ation / Job title (See Instructions)	Employer (See In:	structions)				
	Date	Full name of contributor ut-of-state PAC (ID# Andrus (,1), Jon	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
05	5/08/2012	Contributor address; City, State; Zip Code 2518 Tanglewood Tr Austin, TX 78703		\$300.00	 - 			
				(If travel outside of Texas, complete Schedule T)				
	rincipal occup resident 	ation / Job title (See Instructions)		Employer (See Instructions) Austin Retail Partners				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
05	5/08/2012	Contributor address; City; State; Zip Code 212 Lavaca #300		\$700.00				
		Austin, TX 78701						
				<u> </u>	Texas, complete Schedule T)			
P1	rincipal occup	ation / Job title (See Instructions)	Employer (See Ins Stratus Properti					
	Date	Full name of contributor	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
05	5/11/2012	Contributor address; City; State; Zip Code 7537 Cameron Rd Austin, TX 78752		\$350.00				
				(If travel outside of	Texas, complete Schedule T)			
Pr	rincipal occupa	ation / Job title (See Instructions)	Employer (See Ins	structions)	-			

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	The Instruction	N GUIDE explains how to complete this form.		1 PAGE#	
L			<u> </u>	Schedule: 3/2	25 Report: 5/37
2	FILER NAME	Cole, Sheryl (Mrs.)		3 ACCOUNT# 00001564	(Ethics Commission filers)
4	Date	5 Full name of contributor	¥)	7 Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/11/2012	6 Contributor address; City; State; Zip Code 20818 Jackie's Ranch Rd. Plugerville, TX 78660		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Engineer	ation / Job title (See Instructions)	10 Employer (See in Harte Hankes	structions)	
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/05/2012	Contributor address; City; State; Zip Code 16417 Pocono Dr Austin, TX 78717		\$700.00	!
		Ausuii, 17 /0/1/			1
Ĺ		<u> </u>		<u> </u>	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In best efforts	structions)	
	Date	Full name of contributor	<u>#</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/04/2012	Contributor address; City; State; Zip Code P.O. Box 200532 Austin, TX 78720		\$350.00	!
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor	<u>*</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/04/2012	Contributor address; City; State; Zip Code 22019 Cristobal Dr. Garden Ridge, TX 78266		\$700.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In Austin Retail Pa		
	Date	Full name of contributor ut-of-state PAC (10)	<i>#</i>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/05/2012	Contributor address; City; State; Zip Code 9313 Bluegrass Dr. Austin, TX 78759		\$200.00	ι
				(if travel outside of	Texas, complete Schedule T)
\vdash		ation / Job title (See Instructions)	Employer (See In	<u> 1`</u>	<u> </u>
	Management		Seton Hospital	·	

	OTHER THAN PLEDGES OR LOANS									
	The Instruction	GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/2	25 Report: 6/37					
2	FILER NAME	Cole, Sheryl (Mrs.)		3 ACCOUNT# 00001564	(Ethics Commission filers)					
4	Date	5 Full name of contributor)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)					
	05/04/2012	6 Contributor address; City; State; Zip Code 101 Yaupon Drive Spicewood, TX 78669		\$100.00	 					
	i			(If travel outside of	Texas, complete Schedule T)					
9	Principal occup Attorney	ation / Job title (See Instructions)	10 Employer (See In Self	structions)						
	Date	Full name of contributor uut-of-state PAC (ID# Brown, Dara		Amount of contribution (\$)	In-kind contribution description (if applicable)					
	05/06/2012	Contributor address; City; State; Zip Code 52 The Hills Drive Austin, TX 78738		\$350.00	I I					
				(if travel outside of	Texas, complete Schedule T)					
	Principal occup	ation / Job title (See Instructions)	Employer (See In N/A.	structions)						
	Date	Full name of contributor ut-of-state PAC (ID# Brown, Tammie		Amount of contribution (\$)	In-kind contribution description (if applicable)					
	05/04/2012	Contributor address; City; State; Zip Code 52 The Hills Drive Austin, TX 78738		\$350.00	 					
				(if travel outside of	Texas, complete Schedule T)					
	Principal occup	ation / Job title (See Instructions)	Employer (See In: Microsoft	structions)						
	Date	Full name of contributor ut-of-state PAC (ID#] Burdette (,2), Milo and Carol)	Amount of contribution (\$)	In-kind contribution description (if applicable)					
	05/08/2012	Contributor address; City; State; Zip Code 1103 Meriden Lane Austin, TX 78703	, , , , , , , , , , , , , , , , , , , ,	\$500.00	 					
				(If travel outside of	Texas, complete Schedule T)					
	Principal occup	ation / Job title (See Instructions)	Employer (See In Barshop and Ol							
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)					
	05/07/2012	Contributor address; City; State; Zip Code 2530 HARRIS BLVD Austin, TX 78703		\$350.00	 					
				(If travel outside of	Texas, complete Schedule T)					
	Principal occupa	ation / Job title (See Instructions)	Employer (See In: Cypress Real E							

	The INSTRUCTION	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 5/2	25 Report: 7/37
2	FILER NAME	Cole, Sheryl (Mrs.)	-	3 ACCOUNT# 00001564	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Burns, kevin	<u>; </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	05/04/2012	6 Contributor address; City; State; Zip Code 801 w 5th st suite 100 Austin, TX 78703		\$150.00	
				(if travel outside of	Texas, complete Schedule T)
9	Principal occup	pation / Job title (See Instructions)	10 Employer (See In urbanspace	structions)	·- <u>-</u> -
	Date	Full name of contributor ut-of-state PAC (ID# Caballero, Suzanne	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/12/2012	Contributor address; City; State; Zip Code 1805 Cresthaven Austin, TX 78723		\$150.00	! !
				(if travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/12/2012	Contributor address; City; State; Zip Code 2500 N Houston St Apt 1209 Dallas, TX 75219		\$200.00	!
		Dulias, TA 70210		(If travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See In Circuit of the Ar	structions)	
=	Date	Full name of contributor ut-of-state PAC (ID#	<u> </u>	Amount of	In-kind contribution
	Jako	Coats, Rose, Yale, Ryman & Lee PAC		contribution (\$)	description (if applicable)
	05/07/2012	Contributor address; City; State; Zip Code 3E Greenway Plaza Houston, TX 77046		\$350.00	!
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Connolly (,3), Walter and Kathleen	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/04/2012	Contributor address; City; State; Zip Code 401 Texas Drive Georgetown, TX 78633	•	\$700.00	1
				(If travel outside of	Texas, complete Schedule T)
Г	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
			best efforts		

POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS 1 PAGE# The Instruction Guide explains how to complete this form. Schedule: 6/25 Report: 8/37 (Ethics Commission filers) 2 FILER NAME Cole, Sheryl (Mrs.) 3 ACCOUNT# 00001564 5 Full name of contributor out-of-state PAC (ID#_ 4 Date Amount of In-kind contribution contribution (\$) description (if applicable) Cowden, Allen 6 Contributor address; 05/11/2012 City; State; Zip Code \$350.00 5703 Bull Creek Austin, TX 78756 (if travel outside of Texas, complete Schedule T) 9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Self Full name of contributor ut-of-state PAC (ID# In-kind contribution Date Amount of Curry, Mark contribution (\$) description (if applicable) Vice President Wells Fargo 05/04/2012 Contributor address; City; State; Zip Code \$300.00 4000 Tablenet Dr. Austin, TX 78731 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) best efforts Date Full name of contributor ut-of-state PAC (ID#_ Amount of In-kind contribution contribution (\$) description (if applicable) Cyrier, John Contributor address: 05/05/2012 City; State; Zip Code \$250.00 1301 Westwoos Rd. Lockhart, TX 78644 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Sabre Commercial Full name of contributor ut-of-state PAC (ID# Amount of In-kind contribution Date description (if applicable) contribution (\$) Doe, John and Mane Contributor address: City; State; Zip Code \$350.00 05/12/2012 5117 Valburn Ct Austin, TX 78746 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor ut-of-state PAC (ID#_ In-kind contribution Date Amount of contribution (\$) description (if applicable) Easter, Bob Contributor address; \$250.00 05/04/2012 City; State; Zip Code 7103 West Rim Drive Austin, TX 78731 (if travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Real Estate Easter and Easter

	The Instruction	พ Guide explains how to complete this form.	·· ·	1 PAGE#	
	1110 11101110	- College Capitalis non to complete this form		Schedule: 7/	25 Report: 9/37
2	FILER NAME	Cole, Sheryl (Mrs.)		3 ACCOUNT#	(Ethics Commission filers)
			<u> </u>	00001564	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Erlich, Robert	<u> </u>	7 Amount of contribution (\$)	In-kind contribution description (if applicable)
1	05/10/2012	6 Contributor address; City; State; Zip Code 6108 W. 38th St. Austin, TX 78703		\$250.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Real Estate	ation / Job title (See Instructions)	10 Employer (See In Schlosser Devt.		
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/05/2012	Contributor address; City; State; Zip Code 10101 pinehurst Austin, TX 78747		\$100.00	
				(if travel outside of	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)			Employer (See In		<u> </u>
			Darrick W. Euge	ene & Associates	
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/12/2012	Contributor address; City; State; Zip Code 4007 Crescent Dr. Austin, TX 78722		\$75.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In Childrens Defer		
	Date	Full name of contributor ut-of-state PAC (iD#Fahs (,1), Caroline	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/07/2012	Contributor address; City; State; Zip Code 5916 Savin Hill Ct Austin, TX 78739		\$350.00	1 1 1
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In Stratus Properti		
	Date	Full name of contributor ut-of-state PAC (ID# Fisher, Nancy	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/09/2012	Contributor address; City; State; Zip Code 1005 Congress Ave # 480		\$200.00	
		Austin, TX 78701		(16 tomora) andalab - 4	Taura annulata Catadada M
	Principal accus	ation / Job title (See Instructions)	Employer (See In:	<u> </u>	Texas, complete Schedule T)
	т ппорагоссор	80001 7 200 000 (200 11190 0000119)	Texas Strategy		

	OTHER	THAN PLEDGES OR LOAD	NS 		
	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 8/2	25 Report: 10/37
2	FILER NAME	Cole, Sheryl (Mrs.)		3 ACCOUNT# 00001564	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Flowers, Wilford		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	05/04/2012	6 Contributor address; City; State; Zip Code 6912 Gour Dr Austin, TX 78749		\$200.00	!
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Judicial	eation / Job title (See Instructions)	10 Employer (See In District Judge	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/04/2012	Contributor address; City; State; Zip Code 625 Brentwood St Austin, TX 78752		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Owner	ation / Job title (See Instructions)	Employer (See In City Conservation		
i	Date	Full name of contributor ut-of-state PAC (ID# Friese, Karen)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/04/2012	Contributor address; City; State, Zip Code 6603 Cat Creek Trail Austin, TX 78731		\$200.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Eengineer	ation / Job title (See Instructions)	Employer (See In: Friese and Asso	•	
	Date	Full name of contributor ut-of-state PAC (ID# Fryer, Catherine)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/11/2012	Contributor address; City; State; Zip Code 5504 Woodview Ave. Austin, TX 78756		\$100.00	
					Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In: Bickerstaff Heat	structions) th Delgado Acosta	LLP
	Date	Full name of contributor ut-of-state PAC (ID# Furman, Mary and Albert)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/04/2012	Contributor address; City; State; Zip Code 601 W. 5th St. #1406		\$700.00	
		Austin, TX 78703		(If trough autoide at	Texas, complete Schedule T)
_	Principal occup	ation / Job title (See Instructions)	Employer (See In:	<u> </u>	rozas, complete schedule 1)
	Devt.		Oaktree Realty		

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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 9/2	25 Report: 11/37
2	FILER NAME	Cole, Sheryl (Mrs.)	•	3 ACCOUNT# 00001564	(Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (ID# Gardner, Malcomb	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	05/12/2012	6 Contributor address; City; State; Zip Code 6800 W. Courtyard Austin, TX 78730		\$100.00	
L				L. <u>.</u>	Texas, complete Schedule T)
9	Principal occup Community H	ation / Job title (See Instructions) lousisng	10 Employer (See In Goodwill Indust		
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/04/2012	Contributor address; City; State; Zip Code 613 River Rd Austin, TX 78734		\$250.00	:
				(If travel outside of	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)			Employer (See In	<u> </u>	, <u> </u>
	Attorney		Ges, Sayers an	d Assseron	
	Date	Full name of contributor	<u>#</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/08/2012	Contributor address; City; State; Zip Code 6608 peralto Cove Austin, TX 78730		\$175.00	
ľ				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In Retired	structions)	
ſ	Date	Full name of contributor	#)	Amount of	In-kind contribution
		Googins, Aaron and Wendy		contribution (\$)	description (if applicable)
	05/05/2012	Contributor address; City; State; Zip Code 3302 Enfield Rd Austin, TX 78703		\$250.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Consulting	ation / Job title (See Instructions)	Employer (See In ACG Managem		
	Date	Full name of contributor	*)	Amount of contribution (\$)	In-kind contribution description (if applicable) Best efforts
	05/12/2012	Contributor address; City; State; Zip Code 903 W 6th Street Austin, TX 78701		\$100.00	1
				(If travel outside of	Texas, complete Schedule T)
Г	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	

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	OTHER	THAN PLEDGES OR LOAI	VS 		
	The INSTRUCTION	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 10	0/25 Report: 12/37
2	FILER NAME	Cole, Sheryl (Mrs.)		3 ACCOUNT# 00001564	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Gottesman, Sandy and Lisa		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
•	05/09/2012	6 Contributor address; City; State; Zip Code P.O. Box 709 Coppell, TX 75019		\$350.00	! ! !
				(if travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In The Gottesman		
	Date	Full name of contributor ut-of-state PAC (ID# Graham, Andrea Griswold and Lawrence	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/04/2012	Contributor address; City; State; Zip Code 5909 Bull Creek Road Austin, TX 78757		\$150.00	
L				(If travel outside of	Texas, complete Schedule T)
	Principal occup	vation / Job title (See Instructions)	Employer (See In Texas Gas Sen		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/04/2012	Contributor address; City; State; Zıp Code 7001 Cassye Cove Austin, TX 78759		\$150.00	1
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In Retired	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/08/2012	Contributor address; City; State; Zip Code 9920 FM 1826 Austin, TX 78737		\$350.00	
	١				Texas, complete Schedule T)
	Principal occup Self	ation / Job title (See Instructions)	Employer (See In The Graydon G		
	Date	Full name of contributor ut-of-state PAC (ID# Hall, Jackie)	Amount of contribution (\$)	In-kind contribution description (if applicable)
ı	05/07/2012	Contributor address; City; State; Zip Code 1122 Jackson Dallas, TX 75202	•••••	\$350.00	1
					Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In: Fleck Property I		

Cole, Sheryl (Mrs.)			/25 Report: 13/37
Cole, Sheryl (Mrs.)			120 Report. 13/3/
Cole, Sneryi (Mrs.)		19 4000011174	(Ethics Commission filers)
		3 ACCOUNT# 00001564	(Ethics Commission hers)
			1.6
5 Full name of contributor	·)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 7800 Southwest Pkwy		\$350.00	
Austin, TX 78755			<u> </u>
		<u> </u>	Texas, complete Schedule T)
pation / Job title (See Instructions)			
Full name of contributor ut-of-state PAC (ID#	!)	Amount of	In-kind contribution
Harris, August		contribution (\$)	description (if applicable)
Contributor address; City; State; Zip Code 1901 West 35th Street		\$100.00	! !
Austin, 1X 78703		<u> </u>	
		<u></u>	Texas, complete Schedule T)
nation / Job title (See Instructions)			
Full name of contributor out-of-state PAC (ID# Harrod, Julia)	Amount of contribution (\$)	In-kind contribution description (if applicable)
		}	'
Contributor address; City; State; Zip Code 9002 Westerkirk Dr Austin, TX 78750		\$100.00	
		(lé troval autoldo af	Towns complete Schodule T)
pation / Joh title (See Instructions)	Employer (See In		Texas, complete Schedule 1)
22.017 500 100 (000 110.000010)			
)	Amount of	In-kind contribution description (if applicable)
Harter (,3), Suzanne and Stephen		Contribution (4)	description (if applicable)
Contributor address; City; State; Zip Code 8 Winston Woods Dr. Houston, TX 77024		\$700.00	
		(life terroral australida af	Towns commission Schooling Ti
pation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule 1)
	AISD		
Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4521 Eagle Feather Dr Austin, TX 78735		\$350.00	
		(if travel outside of	Texas, complete Schedule T)
•		4	
	7800 Southwest Pkwy #810 Austin, TX 78755 Pation / Job title (See Instructions) Full name of contributor	T800 Southwest Pkwy #810 Austin, TX 78755	R800 Southwest Pkwy #810 Austin, TX 78755 (If travel outside of Pation / Job title (See Instructions) 10 Employer (See Instructions) Fleck Property Management

L						
	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 12	/25 Report: 14/37	
2	FILER NAME	Cole, Sheryl (Mrs.)		3 ACCOUNT# 00001564	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Heigelenstein, Lisa and Michael	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	05/04/2012	6 Contributor address; City; State; Zip Code 1607 The High Road Austin, TX 78746		\$200.00	 	
				(If travel outside of	Texas, complete Schedule T)	
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In CTRMA	structions)		
	Date	Full name of contributor ut-of-state PAC (ID# Hill, Richard)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/10/2012	Contributor address; City; State; Zip Code 2303 Windsor Rd Austin, TX 78703		\$350.00		
_					Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In: HPI Real Estate			
	Date	Full name of contributor ut-of-state PAC (ID# Holland, Leon and Peggy		Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/05/2012	Contributor address; City; State; Zip Code 10705 Leafwood Lane Austin, TX 78750		\$200.00		
	,			(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In: UT	structions)		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/12/2012	Contributor address; City; State; Zip Code 908 W 18th Street Austin, TX 78701		\$700.00	l 	
				(if travel outside of	Texas, complete Schedule T)	
	Principal occup Cielo Wind P	pation / Job title (See Instructions) ower, LLC	Employer (See In Cielo Wind Sen			
	Date	Full name of contributor ut-of-state PAC (ID# Horton, John	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/08/2012	Contributor address; City; State; Zip Code 3111 Westlake Dr. Austin, TX 78746	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$350.00	i 	
				(If travel outside of	Texas, complete Schedule T)	
\mid	Principal occup	pation / Job title (See Instructions)	Employer (See In self	structions)		

The lost	RUCTION GUIDE explains how to complete this form.		1 PAGE# Schedule: 13	3/25 Report: 15/37			
2 FILER N	AME Cole, Sheryl (Mrs.)	-	3 ACCOUNT# 00001564	(Ethics Commission filers)			
4 Date	5 Full name of contributor ut-of-state PAC (I Howell, Pix and Cathy	D#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
05/08/2	012 6 Contributor address; City; State; Zip Code 635 box canyon rd Wimberley, TX 75411	9	\$100.00]] 			
			(if travel outside of	Texas, complete Schedule T)			
	occupation / Job title (See Instructions) Development and Planning	10 Employer (See In Xblink, Inc.	structions)				
Date	Full name of contributor ut-of-state PAC (I Islam, Rashed	D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
05/09/2	Ontributor address; City; State; Zip Code 11901 Palisades Pkwy Austin, TX 78732	9	\$200.00	1			
			(if travel outside of	Texas, complete Schedule T)			
Principal	occupation / Job title (See Instructions)	Employer (See In					
		HDR Engineeri	ng, Inc. 				
Date	Full name of contributor ut-of-state PAC (I Jastrow, C	D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
05/08/2)12 Contributor address; City; State; Zip Code 5901 Highland Hills Tr Austin, TX 78731	9	\$100.00	J 			
	Addun, 12 70701		(If travel outside of	Texas, complete Schedule T)			
Principal Enginee	occupation / Job title (See Instructions)	Employer (See In Prominent Title					
Date	Full name of contributor	D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
05/12/2)12 Contributor address; City; State; Zip Code 21812 Briarcliff Dr Briarcliff, TX 78669	9	\$350.00] 			
			(If travel outside of	Texas, complete Schedule T)			
Principal	occupation / Job title (See Instructions)	Employer (See In Gold Eagle Inve					
Date	Full name of contributor ut-of-state PAC (I Kargbo (,3), Edward	D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
05/04/2	O12 Contributor address; City; State; Zip Code 8834 Honeysuckle Trail Austin, TX 78759	•	\$700.00	 			
			(If travel outside of	Texas, complete Schedule T)			
Principal	occupation / Job title (See Instructions)	Employer (See In Yellow Cab	structions)				

OTHER THAN PLEDGES O	or Loans
The INSTRUCTION GUIDE explains how to complete this	form. 1 PAGE # Schedule: 14/25 Report: 16/37
2 FILER NAME Cole, Sheryl (Mrs.)	3 ACCOUNT# (Ethics Commission filers) 00001564
4 Date 5 Full name of contributor □ out-o Karotkin, Leah	-state PAC (ID#) 7 Amount of 8 In-kind contribution contribution (\$) description (if applicable)
05/11/2012 6 Contributor address; City; Sta 922 Terrace Mountain Austin, TX 78746	te; Zip Code \$100.00
	(If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions) Insurance Atty	10 Employer (See Instructions) Self
Date Full name of contributor out-of Kennedy, John	-state PAC (ID#) Amount of In-kind contribution contribution (\$) description (if applicable)
05/08/2012 Contributor address; City; Sta 4555 Santa Clara Blvd Austin, TX 78746	te; Zip Code \$100.00
Addin, 1770/40	(Manual autoide of Toyan complete School of Toyan
Principal occupation / Job title (See Instructions)	Employer (See Instructions) Commercial Texas
Date Full name of contributor ☐ out-of Kilday, Doug	-state PAC (ID#) Amount of In-kind contribution contribution (\$) description (if applicable)
05/10/2012 Contributor address; City; Sta 5408 Shoal Creek Blvd. Austin, TX 78756	te; Zip Code \$100.00
	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)	Employer (See Instructions) Graves, Dougherty, Hearon & Moody, P.C.
Date Full name of contributor ☐ out-of Klee, Rose Marie	-state PAC (ID#) Amount of In-kind contribution contribution (\$) description (if applicable)
05/05/2012 Contributor address; City; Sta 2705 Bee Caves Rd. Austin Austin, TX 78756	te; Zip Code \$350.00
	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)	Employer (See Instructions) Jacobs Engineering
Date Full name of contributor ut-of Linehan, Paul and Judy	-state PAC (ID#) Amount of In-kind contribution contribution (\$) description (if applicable)
05/05/2012 Contributor address; City; Sta 3502 Lost Creek Blvd Austin, TX 78735	te; Zip Code \$325.00
	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) Atty	Employer (See Instructions) Land Strategies

	The Instruction	ON Guide explains how to comp	plete this form.		1 PAGE# Schedule: 15	5/25 Report: 17/37
2	FILER NAME	Cole, Sheryl (Mrs.)			3 ACCOUNT# 00001564	(Ethics Commission filers)
4	Date	5 Full name of contributor (Mahlum, Terry	out-of-state PAC (ID#	<u> </u>	7 Amount of contribution (\$)	8
	05/10/2012	6 Contributor address; C 2901 Employee Ave. Austin, TX 78751	City; State; Zip Code		\$350.00	
					(If travel outside of	Texas, complete Schedule T)
9	Principal occup	pation / Job title (See Instructions	3)	10 Employer (See In: ABIA	structions)	
	Date	Full name of contributor 【 Marsh, Charlie	ut-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/11/2012	Contributor address; C 2212 Windsor Rd Austin, TX 78703	City; State; Zip Code		\$350.00]
					(If travel outside of	Texas, complete Schedule T)
	Principal occup Real Estate	pation / Job title (See Instructions	.)	Employer (See In: Endeavor	structions)	
	Date	Full name of contributor [Martinez (,3), Roman	ut-of-state PAC (ID#	()	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/04/2012	Contributor address; C 510 E. 7th St. Houston, TX 77007	City; State; Zip Code		\$700.00	! !
L.		· · · · · · · · · · · · · · · · · · ·	 			Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions	.)	Employer (See In: Texas Taxi	structions)	
	Date	Full name of contributor [Matingou, Belinda Jean	ut-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/07/2012	Contributor address; C 3118 Carnoousty St. Round Rock, TX 78664	City; State; Zip Code		\$300.00	
		<u> </u>				Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions	·) 	Employer (See In: Dell	structions)	
	Date	Full name of contributor [Mattingly, Steve	ut-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/10/2012	Contributor address; C 11017 Hillside Drive Austin, TX 78736	City; State; Zip Code		\$350.00	! !
		<u></u>				Texas, complete Schedule T)
	Principal occupa	eation / Job title (See Instructions		Employer (See In: Live Oak-Gottes		

	INER	THAN PLEDGES OR LOAD	N9		
The	NSTRUCTION	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 16	6/25 Report: 18/37
2 FILE	ER NAME	Cote, Sheryl (Mrs.)		3 ACCOUNT# 00001564	(Ethics Commission filers)
4 0	ate	5 Full name of contributor	<u>#</u>)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
05/0	07/2012	6 Contributor address; City; State; Zip Code 3965 Sendero Drive Austin, TX 78735	• • • • • • • • • • • • • • • • • • • •	\$400.00	!
				(If travel outside of	Texas, complete Schedule T)
	cipal occup F Agency	oation / Job title (See Instructions)	10 Employer (See In HDR Engineeri		
D	ate	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
05/0	04/2012	Contributor address; City; State; Zip Code Old State Capital Plaza		\$350.00	
		#525 Springfield, IL 62701		/if travel outside of	Texas, complete Schedule T)
Prin	cipal occur	pation / Job title (See Instructions)	Employer (See In	<u></u>	Texas, complete schedule 1)
D	ate	Full name of contributor	()	Amount of contribution (\$)	In-kind contribution description (if applicable)
05/0	06/2012	Contributor address; City; State; Zip Code 28 Sundown Parkway Austin, TX 78746		\$200.00	
				<u> </u>	Texas, complete Schedule T)
Princ	cipal occup	eation / Job title (See Instructions)	Employer (See In Moreland Prope		
D	ate	Full name of contributor ut-of-state PAC (ID# Nichols, Ana Farina and Michael)	Amount of contribution (\$)	In-kind contribution description (if applicable)
05/0	7/2012	Contributor address; City; State; Zip Code 513 Kodiak Trail Cedar Park, TX 78613		\$350.00	\
				(If travel outside of	Texas, complete Schedule T)
Princ Reti		ation / Job title (See Instructions)	Employer (See In Freese and Nici		
D	ate	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
05/0	8/2012	Contributor address; City; State; Zip Code 3215 Hampton Austin, TX 78703	İ	\$100.00	! !
				(If travel outside of	Texas, complete Schedule T)
		ation / Job title (See Instructions) Real Estate	Employer (See In: self	structions)	

	The INSTRUCTION	אס Guide explains how to complete this form.		1 PAGE# Schedule: 17	7/25 Report: 19/37
2	FILER NAME	Cole, Sheryl (Mrs.)		3 ACCOUNT # 00001564	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID#Oles (,2), Patrick	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	05/04/2012	6 Contributor address; City; State; Zip Code 2109 Rockmoor Ave Austin, TX 78703		\$500.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In Barshop-Oles	structions)	
	Date	Full name of contributor out-of-state PAC (ID# Peel (,2), Larry and Deborah	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/09/2012	Contributor address; City; State; Zip Code PO BOX 248 Austin, TX 78767		\$700.00	! !
	:			(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In SELF EMPLOY		
	Date	Full name of contributor	£)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/07/2012	Contributor address; City; State; Zip Code 9500 Jollyville Road #214		\$250.00	! !
		Austin, TX 78759			'
<u> </u>	Principal occur	ation / Job title (See Instructions)	Employer (See In	<u> </u>	Texas, complete Schedule T)
	r micipal occup	adon / 300 tide (See Insuducions)	CP&Y, Inc.	Sirdetions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/06/2012	Contributor address; City; State; Zip Code 1705 Datura Ct Austin, TX 78733		\$700.00	
				(if travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In Stratus Properti		<u> </u>
	Date	Full name of contributor ut-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/11/2012	Contributor address; City; State; Zip Code 1601 Ridgemont Austin, TX 78723	· · · · · · · · · · · · · · · · · · ·	\$200.00	
				(If travel outside of	Texas, complete Schedule T)
\vdash	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
			Law Offices of I	Hubert Bell	

L	OTHER	THAN PLEDGES OR LOAD			
Г	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 18	3/25 Report: 20/37
2	FILER NAME	Cole, Sheryl (Mrs.)	<u></u>	3 ACCOUNT# 00001564	(Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (ID# Railsback, Sherie	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	05/05/2012	6 Contributor address; City; State; Zip Code 5300 Starlight Terrace #301 Austin, TX 78701	••••••	\$350.00	!
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	eation / Job title (See Instructions)	10 Employer (See In Schlosser Devt		
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/04/2012	Contributor address; City; State; Zip Code 2711 Hillview Green Ln Austin, TX 78703		\$250.00	[
i				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In Philharmonic	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/04/2012	Contributor address; City; State; Zip Code 5403 Tortuga Trail Austin, TX 78731		\$200.00	
					Texas, complete Schedule T)
	Attorney	ation / Job title (See Instructions)	Employer (See In Reeves and	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/05/2012	Contributor address; City; State; Zip Code 409 El Paso St. Austin, TX 78704		\$100.00)
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In: Girl Scouts of C	,	
	Date	Full name of contributor out-of-state PAC (ID# Rivera, Elisa Pimiento and Miguel	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/09/2012	Contributor address; City; State; Zip Code 704 Pattersson Ave Austin, TX 78703		\$125.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Community or	ation / Job title (See Instructions) rganization	Employer (See In	structions)	

	The Instruction	N Guide explains how to complete this form.		1 PAGE # Schedule: 19	/25 Report: 21/37	
2	FILER NAME	Cole, Sheryl (Mrs.)		3 ACCOUNT# 00001564	(Ethics Commission filers)	
4	Date	5 Full name of contributor ut-of-state PAC (ID# Robinson, J.O.)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	05/04/2012	6 Contributor address; City; State; Zıp Code P.O. Box 9556 Austın, TX 78766		\$350.00		
				(If travel outside of	Texas, complete Schedule T)	
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In: best effort	structions)		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/09/2012	Contributor address; City; State; Zip Code 8934 Wimberly Cove Austin, TX 78735		\$350.00		
				<u></u>	Texas, complete Schedule T)	
	Public Relation	ation / Job title (See Instructions) Ins	Employer (See In: Self	structions)		
	Date	Full name of contributor	_)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/11/2012	Contributor address; City; State; Zip Code 1605 Twilight Ridge Austin, TX 78746		\$700.00		
			J	(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In Austin Eagle Ma			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/06/2012	Contributor address; City; State; Zip Code P.O. Box 99 Austin, TX 78767		\$250.00	 	
		<u> </u>		(if travel outside of	Texas, complete Schedule T)	
	Principal occup banker	ation / Job title (See Instructions)	Employer (See Ins Prosperity Bank			
	Date	Full name of contributor out-of-state PAC (ID# Sanders, Michael Holleran and Judith)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/06/2012	Contributor address; City; State; Zip Code 3811 Ridgelea Drive Austin, TX 78731		\$100.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)		

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	The INSTRUCTO	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 20)/25 Report: 22/37	
2	FILER NAME	Cole, Sheryl (Mrs.)		3 ACCOUNT# 00001564	(Ethics Commission filers)	
4	Date	5 Full name of contributor ut-of-state PAC (ID# Schlaud, Christina de los Santos and Paul	<u>; </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	05/04/2012	6 Contributor address; City; State; Zip Code 7003Shoal Creek Blvd Austin, TX 78757		\$100.00	! ! !	
	ļ	1		(if travel outside of	Texas, complete Schedule T)	
9	Principal occup Atty	pation / Job title (See Instructions)	10 Employer (See Ins Reeves andBrig			
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/11/2012	Contributor address; City; State; Zip Code 6556 Needham Lane Austin, TX 78739		\$200.00	 	
	- : :==1				Texas, complete Schedule T)	
	Principal occup Engineer	pation / Job title (See Instructions)	Employer (See Ins Jones Carter	structions)		
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/09/2012	Contributor address; City; State; Zip Code 601 N. Lamar #301 Austin, TX 78701		\$300.00	 	
<u> </u>	Directional angula		Employer (See Ins		Texas, complete Schedule T)	
	Real Estate D	pation / Job title (See Instructions) Devt	self	structions)		
	Date	Full name of contributor	·	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/06/2012	Contributor address; City; State; Zip Code 13216 Mansfield Drive Austin, TX 78732		\$350.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	pation / Job title (See Instructions)	Employer (See Ins	structions)	,	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/08/2012	Contributor address; City; State; Zip Code 108 Woodview Ct Austin, TX 78746		\$250.00		
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	pation / Job title (See Instructions)	Employer (See Ins			
			Austin Metal and	d Iron		

Texas Ethics Commission

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	THE MSTRUCTION	M Goine explains now to complete this form.		Schedule: 21	/25 Report: 23/37	
2	FILER NAME	Cole, Sheryl (Mrs.)		3 ACCOUNT#	(Ethics Commission filers)	
	_			00001564		
4	Date	5 Full name of contributor ut-of-state PAC (ID#	·	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
		Shapiro, Robert and Phyllis		CONTRIBUTION (\$)	description (in applicable)	
	05/08/2012	6 Contributor address; City; State; Zip Code		\$250.00		
	00,00	42 Sundown Parkway Austin, TX 78746		,	1	
		Addition 10 TOTAL		}	l 	
	D. C. C. C.	ation (list title (O - between)	45 F		Texas, complete Schedule T)	
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In Austin Metal an			
_				,		
	Date	Full name of contributor ut-of-state PAC (ID# Sharples, Brian	<u></u>)	Amount of contribution (\$)	in-kind contribution description (if applicable)	
	!	Gliaipies, Bliail		(,		
	05/06/2012	Contributor address; City; State; Zip Code		\$350.00	1	
		200 Lolita Pass Austin, TX 78749			1	
					' 	
	Principal occup	ation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule T)	
	i iliopai occup	autori / Job auto (See Matuduoris)	Homeaway	344040113)		
_	D-4-	5 lb			1 1-13-4	
	Date	Full name of contributor ut-of-state PAC (ID# Shia, DDS, George)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
Ì		• • • • • • • • • • • • • • • • • • • •			1	
	05/04/2012	Contributor address; City; State; Zıp Code 900 Houston St		\$100.00	Í	
		Austin, TX 78756			ĺ	
				 (If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In			
	Dentist		self			
	Date	Full name of contributor ut-of-state PAC (ID#)	Amount of	In-kind contribution	
		Siff, Ted		contribution (\$)	description (if applicable)	
					I	
	05/12/2012	Contributor address; City; State; Zip Code 604 West 11th St		\$350.00	I	
		Austin, TX 78701			ŀ	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In Parklane Pubs	structions)		
			Faikialle Fubs			
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution	
		Skaggs, John		Continuation (\$)	description (if applicable)	
	05/08/2012	Contributor address; City; State; Zip Code		\$200.00		
	00/00/20/2	1108 Toyath St. Austin, TX 78704		Ψ200.00		
		Zudding TA FOTON			<u>_</u>	
	Delegiant	object / Joh Kills (Con John John John John John John John Jo	F		Texas, complete Schedule T)	
	Hincipal occup	ation / Job title (See Instructions)	Employer (See In: The Bank Advis			
		i		• • • •		

	OTHER	THAN PLEDGES OR LOAI	NS		
	The Instruction	אַס GUIDE explains how to complete this form.		1 PAGE# Schedule: 22	2/25 Report: 24/37
2	FILER NAME	Cole, Sheryl (Mrs.)		3 ACCOUNT # 00001564	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# STR Austin Hospitality LLC	#	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	05/07/2012	6 Contributor address; City; State; Zip Code 1405 W. 6th St. Austin, TX 78703		\$350.00	
				(if travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Swaffar, Bob	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/08/2012	Contributor address; City; State; Zip Code 906 W 17th St. Austin, TX 78701		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Ceramic Artis	ation / Job title (See Instructions)	Employer (See In artStar Pottery	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Swan (,1), Laurie	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/06/2012	Contributor address; City; State; Zip Code 2518 Tanglewood Tree Austin, TX 78703		\$350.00	[
				L	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In Stratus Properti		
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/12/2012	Contributor address; City; State; Zip Code 10005 Pickfair Drive Austin, TX 78750		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Student	ation / Job title (See Instructions)	Employer (See In Student	structions)	
	Date	Full name of contributor ☐ out-of-state PAC (ID# Team, Linda	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/04/2012	Contributor address; City; State; Zip Code 600 Bellvue Place Austin, TX 78705		\$100.00	
				<u> </u>	Texas, complete Schedule T)
	Principal occup Real Estate	ation / Job title (See Instructions)	Employer (See In self	structions)	

The INSTRUCT	TION GUIDE explains how to complete this form.		1 PAGE# Schedule: 23	3/25 Report: 25/37
2 FILER NAME	Cole, Sheryl (Mrs.)		3 ACCOUNT# 00001564	(Ethics Commission filers)
4 Date	Date 5 Full name of contributor out-of-state PAC (ID#) Texas Taxi PAC (,2)		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
05/08/2012	6 Contributor address; City; State; Zip Code 910 Congress Ave #1500 Austin, TX 78701		\$350.00	
9 Principal occi	upation / Job title (See Instructions)	10 Employer (See In	structions)	<u> </u>
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
05/08/2012	05/08/2012 Contributor address; City; State; Zip Code 305 Le Grande Ave. Austin, TX 78704		\$350.00	1 [[
			(if travel outside of	Texas, complete Schedule T)
Principal occi Civil Engine	upation / Job title (See Instructions) er	Employer (See In Urban Design C		<u>-</u>
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
05/11/2012	Contributor address; City; State; Zip Code 2913 Cherry Lane		\$350.00	
	Austin, TX 78703		<u> </u>	Texas, complete Schedule T)
Principal occi	upation / Job title (See Instructions)	Employer (See In Imperium	structions)	
Date	Full name of contributor	#	Amount of contribution (\$)	In-kind contribution description (if applicable)
05/11/2012	Contributor address; City; State; Zip Code 1706 Graywood Austin, TX 78731		\$700.00	1
			(If travel outside of	Texas, complete Schedule T)
Principal occi consultant	upation / Job title (See Instructions)	Employer (See In Consort, Inc.	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
05/04/2012	Contributor address; City; State; Zip Code 4306 Kilgore Lane Austin, TX 78727	• • • • • • • • • • • • • • • • • • • •	\$100.00	
			(if travel outside of	Texas, complete Schedule T)
Principal occu	upation / Job title (See Instructions)	Employer (See In City of Austin	<u> </u>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

	UTHER	THAN PLEDGES OR LOAD			
	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 24	1/25 Report: 26/37
2	FILER NAME	Cole, Sheryl (Mrs.)		3 ACCOUNT# 00001564	(Ethics Commission filers)
4	Date	5 Full name of contributor uut-of-state PAC (ID# Verde Camp		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	05/04/2012	6 Contributor address; City; State; Zip Code 1203 W. 9th Sst. Austin, TX 78703		\$300.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/05/2012	Contributor address; City; State; Zip Code 1615 Lupine Lane Austin, TX 78741		\$200.00	
					Texas, complete Schedule T)
	Principal occup Sales	eation / Job title (See Instructions)	Employer (See In Texas Realtors	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/10/2012	Contributor address; City; State; Zip Code 3904 Toro Canyon Austin, TX 78746		\$500.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In: Barshop-Oles	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/05/2012	Contributor address; City, State; Zip Code P.O. Box 6941 Austin, TX 78762		\$600.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Consultant	ation / Job title (See Instructions)	Employer (See In: MRSW	structions)	
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/05/2012	Contributor address; City; State; Zip Code 3403 Ledgestone Austin, TX 78731		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)	<u> </u>
			Fonteno and Co	ot	

	OTHER THAN PLEDGES OR LOANS				
	The Instruction	GUIDE explains how to complete this form.		1 PAGE# Schedule: 25	/25 Report: 27/37
2	FILER NAME	Cole, Sheryl (Mrs.)		3 ACCOUNT# 00001564	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Williams, Jeffrey and Barbra)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	05/11/2012	6 Contributor address; City; State; Zip Code 1409 Countryside Bend Fredeicksburg, TX 78624	1409 Countryside Bend		
					Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In Joseph Williams	structions) s Management	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/08/2012	Contributor address; City; State; Zip Code 3406 Timberwood Cr. Austin, TX 78703		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In MWSW Texas	structions)	
	Date	Full name of contributor	.)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/11/2012 	Contributor address; City; State; Zip Code 7315 Scenic Brook Drive Austin, TX 78736	•••••	\$350.00 	
					Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) Engloyer (See Instructions) Engloyer (See Instructions) Dannenbaum I		Employer (See In Dannenbaum E			
	Date	Full name of contributor ut-of-state PAC (ID# Zimmerman, Mark)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/11/2012	Contributor address; City; State; Zip Code 4807 Ave C Austin, TX 78701		\$350.00	
					Texas, complete Schedule T)
	Principal occup Real Estate	ation / Job title (See Instructions)	Employer (See In Schlosser Devt.		

SCHEDULE F

Advertising Expense Accounting/Banking

Gifts/Awards/Memorial Expense Legal Services

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense

Loan Repayment/Reimbursement Transportation Equipment & Related Expense

Consulting Expe Event Expense Fees	Polling Expense Printing Expense	Travel In District Travel Out Of District Office Overhead/Rental Exper	Candidate/ nse OTHER (enter	Donations Made By Officeholder/Political Committee r a category not listed above)
1 PAGE#	2 FILER NAME			3 ACCOUNT # (TEC filers)
Schedule: 1/9 Re	Cala Chand (Man)			00001564
4 Date 05/04/2012	5 Payee name Adisa Communications			
6 Amount (\$)	7 Payee address City; State;	Zıp Code		
\$207.00		Lip 0000		
8 PURPOSE OF	(a) Category (See Categories listed at the top of Loan Repayment/Reimbursement	' '	scription (If travel outside imbursement	of Texas, complete Schedule T)
EXPENDITURE				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date	Payee name			
05/12/2012	Adisa Communications			
Amount (\$)	Payee address City; State;	Zip Code		
\$1,397.44	13492 Research Blvd. Austin, TX 78701			
PURPOSE OF	Category (See Categories listed at the top of Loan Repayment/Reimbursement		scription (If travel outside imbursement for Camp	of Texas, complete Schedule T) aign Expenses
EXPENDITURE				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date	Payee name American Color Lab	,		
05/12/2012		Zip Code		
Amount (\$) \$27.00	1500 St. Elmos	Zip Code		
	Austin, TX 75749			
PURPOSE	Category (See Categories listed at the top of Printing Expense	· I	scription (If travel outside	of Texas, complete Schedule T)
OF EXPENDITURE	T Tilliang Exposite	ļ	ung	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date	Payee name			
05/12/2012	American Express			
Amount (\$)	Payee address City; State;	Zip Code		
\$180.00	One Cristina Center Wilmington, DE 19801			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of Office Overhead/Rental Expense	•	scription (If travel outside y Pal fees	of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expe	ing Legal Services Solic	tation/Fundraising Expense Transportation E	Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By	
Consulting Experi Event Expense			onations Made By ficeholder/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.				
4 DACE#	2 FILER NAME		3 ACCOUNT# (TEC filers)	
1 PAGE#	_ 6 1 6 1 1 1 1 1		00001564	
Schedule: 2/9 Re	POT. 20101	<u> </u>	00001504	
4 Date 05/12/2012	5 Payee name American Express			
6 Amount (\$)	7 Payee address City; State; Zip Co	vde		
		AC .		
\$422.86	Wilmington, DE 19801			
	_			
8	(a) Category (See Categories listed at the top of this sch	edule) (b) Description (If travel outside of	f Texas, complete Schedule T)	
PURPOSE OF	Office Overhead/Rental Expense	payment		
EXPENDITURE				
9 Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought:	Office held:	
to benefit C/OH				
Date	Payee name			
05/07/2012	Capital Area Progressive Democrats			
Amount (\$)	Payee address City; State; Zip Co	ode		
\$250.00	P. O. Box 142			
	Austin, TX 78767			
PURPOSE	Category (See Categories listed at the top of this sch	_ · · · · · · · · · · · · · · · · · · ·	f Texas, complete Schedule T)	
OF	Fees	fees		
EXPENDITURE				
Complete ONLY if	Candidate / Officeholder name	Office saught:	Office held:	
direct expenditure to benefit C/OH				
Date	Payee name			
05/12/2012	Cole, Sheryl (Mrs.)			
Amount (\$)	Payee address City; State; Zip Co	ode		
\$46.00	4101 Wildwood			
\$ 10.00	Austin, TX 78722			
			<u></u>	
PURPOSE	Category (See Categories listed at the top of this sch	,	f Texas, complete Schedule T)	
OF	Event Expense	Reimbursement for copies		
EXPENDITURE			•	
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:	
direct expenditure	Condition of the state of the s	Onico oddyna	omoo nom.	
to benefit C/OH				
Date	Payee name			
05/12/2012	Greenberg Quinlan			
Amount (\$)	Payee address City; State; Zip Co	vae		
\$16,300.00	10 G Street, NE Washington, DC 20002			
	Tradingui, Do 2002			
	Category (See Categories listed at the top of this sch	edule) Description (If travel outside o	f Texas, complete Schedule T)	
PURPOSE	Consulting Expense	canvasing/survey	. ,	
OF EXPENDITURE	-		1	
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought	Office held:	
to benefit C/OH				

SCHEDULE F

(512)463-5800 TDD 1-800-735-2989

EXPENDITURE CATEGORIES

Advertising Expense Accounting/Banking Consulting Expense Event Expense

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

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

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

Fees	Printing Expense Printing Expense The Instruction Guide explains he	d/Rental Expense OTHER (ente	r a category not listed above)
1 PAGE#	2 FILER NAME	<u> </u>	3 ACCOUNT # (TEC filers)
Schedule: 3/9 Re	eport: 30/37 Cole, Sheryl (Mrs.)		00001564
4 Date	5 Payee name	·	
05/12/2012	Jack and Jill		
6 Amount (\$)	7 Payee address City; State; Zip Code		
\$270.00	704 E. St. Johns Austin, TX 78752		
8 PURDOSE	(a) Category (See Categories listed at the top of this schedule)		e of Texas, complete Schedule T)
PURPOSE OF	OTHER	membership	
EXPENDITURE			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
05/04/2012	Jitahidi, Joia		
Amount (\$)	Payee address City; State; Zip Code		
\$1,500.00	5114 Balcones Woods Dr. Austin, TX 78759		
21122005	Category (See Categories listed at the top of this schedule)	Description (If travel outside	of Texas, complete Schedule T)
PURPOSE OF	Consulting Expense	media communications	
EXPENDITURE			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
05/12/2012	Jitahidi, Joia		
Amount (\$)	Payee address City; State; Zip Code		
\$5,000.00	5114 Balcones Woods Dr. Austin, TX 78759		
	Category (See Categories listed at the top of this schedule)	Description (If travel outside	of Texas, complete Schedule T)
PURPOSE OF	Consulting Expense	media communications	- -
EXPENDITURE			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
05/07/2012	Kinkos		
Amount (\$)	Payee address City; State; Zip Code		
\$5.96	6406 IH 35 Austin, TX 78752		
BUDGGE	Category (See Categories listed at the top of this schedule)	Description (If travel outside	of Texas, complete Schedule T)
PURPOSE OF	Printing Expense	fliers	
EXPENDITURE			
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought:	Office held:

Austin, Texas 78711-2070

POLITIC	AL EXPE	NDITURES				SCHEDULE F
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ing Legal: nse Food/E Polling	wards/Memorial Expense Services Severage Expense Expense g Expense	DITURE CATEO Salaries/Wages/O Solicitation/Fundt Travel In District Travel Out of Dis Office Overhead/	Contract Labor raising Expense	Transportations Contributions Candidate OTHER (ente	ment/Reimbursement on Equipment & Related Expense \\Donations Made By \Officeholder/Political Committee er a category not listed above)
1 PAGE#		2 FILER NAME				3 ACCOUNT # (TEC filers)
Schedule: 4/9 Re	port: 31/37 5 Payee name	Cole, Sheryl (Mrs.)				00001564
4 Date 05/04/2012	Love, Clair					
6 Amount (\$)	7 Payee addre	ss City; State;	Zip Code			
\$1,500.00	2006 Sand Austin, TX	berg Dr. 78752				
PURPOSE OF EXPENDITURE		ee Categones listed at the top of ages/Contract Labor	this schedule)	(b) Description salary	(If travel outside	e of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate /	Officeholder name		Office so	ught:	Office held:
Date	Payee name			<u></u>		
05/08/2012	Love, Claire		=			
Amount (\$)	Payee addre	• •	Zip Code			
\$1,037.00	2006 Sand Austin, TX					
PURPOSE		ee Categories listed at the top of	this schedule)	Description	-	le of Texas, complete Schedule T)
OF	Loan Repa	yment/Reimbursement		Reimbursei	nent for Cam	paign Expenses
EXPENDITURE		•		1		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / (Officeholder name		Office so	ught:	Office held:
Date	Payee name			<u></u>		<u> </u>
05/12/2012	Love, Claire					
Amount (\$)	Payee addre	• • • • • • • • • • • • • • • • • • • •	Zip Code			
\$149.00	2006 Sand Austin, TX	-0				
PURPOSE		ee Categories listed at the top of	this schedule)	Description	•	le of Texas, complete Schedule T)
OF	Loan Repa	yment/Reimbursement		Reimburser	nent	
EXPENDITURE						
Complete ONLY if direct expenditure to benefit C/OH	Candidate /	Officeholder name		Office so	ught:	Office held:
Date	Payee name					
05/12/2012	Love, Claire					<u></u>
Amount (\$)	Payee addre	•	Zip Code			
\$500.00	2006 Sandl Austin, TX	78752				
PURPOSE		ee Categories listed at the top of	this schedule)	Description	-	e of Texas, complete Schedule T)
OF	Salaries/Wa	ages/Contract Labor		contract lab	or	
EXPENDITURE						
Complete ONLY if direct expenditure to benefit C/OH	Candidate / 0	Officeholder name		Office so	ught:	Office held:

SCHEDULE F

EXPENDITURE CATEGORIES Advertising Expense Gifts/Awards/Memorial Expense

Advertising Expense Gifts/Awards/Memorial Expense Salanes/Wages/Contract Labor Accounting/Banking Legal Services Solicitation/Fundraising Expense Consulting Expense Food/Beverage Expense Travel In District Travel Out Of District Fees Printing Expense Office Overhead/Rental Expense The Instruction Guide explains how to complete th		sing Expense ct ental Expense	Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) m.
1 PAGE# Schedule: 5/9 Re	2 FILER NAME Cole, Sheryl (Mrs.)		3 ACCOUNT # (TEC filers) 00001564
4 Date	5 Payee name		00001364
05/07/2012	MAP		
6 Amount (\$)	7 Payee address City; State; Zip Code		
\$1,779.25	2400 S. 4th St. Austin, TX 78701		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description printing	(If travel outside of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sou	ght: Office held:
Date	Payee name		
05/07/2012	Message, Audience and Presentation		
Amount (\$)	Payee address City; State; Zip Code 2400 S. 4th St.		
\$9,000.00	Austin, TX 78704		
PURPOSE	Category (See Categories listed at the top of this schedule)		(If travel outside of Texas, complete Schedule T)
OF EXPENDITURE	Advertising Expense	advertising	
Complete ONLY if direct expenditure to benefit C/QH	Candidate / Officeholder name	Office sou	ght: Office held:
Date 05/10/2012	Payee name Message, Audience and Presentation		
Amount (\$)	Payee address City; State; Zip Code		
\$2,500.00	2400 S. 4th St. Austin, TX 78704		
PURPOSE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Political strate	(If travel outside of Texas, complete Schedule T)
OF EXPENDITURE	•		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office soug	ht: Office held:
Date	Payee name		
05/05/2012	Pay Pal		
Amount (\$)	Payee address City; State; Zip Code		
\$172.83	2211 N. 1st St. San Jose, CA 95131		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description Vendor Fees	(If travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office soug	ht: Office held:

POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Advertising Expense Accounting/Banking Consulting Expense Grfts/Awards/Memorial Expense Legal Services Salanes/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Food/Beverage Expense Travel In District Event Expense Polling Expense Travel Out Of District Office Overhead/Rental Expense OTHER (enter a category not listed above) Fees Printing Expense The Instruction Guide explains how to complete this form. 2 FILER NAME 1 PAGE# 3 ACCOUNT # (TEC filers) Cole, Sheryl (Mrs.) 00001564 Schedule: 6/9 Report: 33/37 4 Date 5 Payee name Peaceful Media 05/12/2012 6 Amount (\$) 7 Pavee address City: State: Zip Code \$267.00 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 **PURPOSE** Consulting Expense website strategy OF **EXPENDITURE** 9 Complete ONLY if Candidate / Officeholder name Office sought Office held: direct expenditure to benefit C/OH Date Payee name 05/06/2012 **Prosperity Bank** Amount (\$) Payee address City; State; Zip Code 12730 Research Blvd \$7.50 Austin, TX 78759 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Accounting/Banking service charge OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 05/04/2012 Pryor, Tyler Amount (\$) Payee address City; State; Zip Code 4510 Yellow Rose Trail \$130.00 Austin, TX 78749 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Consulting Expense phone bank OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 05/09/2012 Pryor, Tyler Amount (\$) Payee address City; State; Zip Code 4510 Yellow Rose Trail \$2,200.00 Austin, TX 78749 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Salaries/Wages/Contract Labor salary OF **EXPENDITURE** Complete ONLY If Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH

EXPENDITURE CATEGORIES

POLITICAL EXPENDITURES

#120-631 Austin, TX 78750

Consulting Expense

Candidate / Officeholder name

PURPOSE

OF **EXPENDITURE**

Complete ONLY if direct expenditure to benefit C/OH

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

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

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# 2 FILER NAME 3 ACCOUNT # (TEC filers) Cole, Sheryi (Mrs.) Schedule: 7/9 Report: 34/37 00001564 4 Date 5 Payee name 05/09/2012 Pryor, Tyler Payee address Zip Code 6 Amount (\$) City: State; 4510 Yellow Rose Trail \$1,644.00 Austin, TX 78749 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 **PURPOSE** Consulting Expense Canvassing OF **EXPENDITURE** 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 05/05/2012 Robinson, Shuronda Amount (\$) Payee address City; State; Zip Code 13492 Research Blvd. \$3,500.00 #120-631 Austin, TX 78750 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Consulting Expense consulting services OF **EXPENDITURE** Candidate / Officeholder name Office held: Complete ONLY if Office sought: direct expenditure to benefit C/OH Date Pavee name Robinson, Shuronda 05/12/2012 Payee address City; State; Amount (\$) Zip Code 13492 Research Blvd. \$7,000.00 #120-631 Austin, TX 78750 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** consulting fees Consulting Expense OF **EXPENDITURE** Candidate / Officeholder name Office sought: Office held: Complete ONLY if direct expenditure to benefit C/OH Date Pavee name Robinson, Shuronda 05/12/2012 City; State; Zip Code Amount (\$) Payee address 13492 Research Blvd. \$6,000.00

Description

consulting fees

Office sought:

(If travel outside of Texas, complete Schedule T)

Office held:

Complete ONLY if

direct expenditure to benefit C/OH

Candidate / Officeholder name

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 (512)463-5800 TDD 1-800-735-2989 POLITICAL EXPENDITURES SCHEDULE F EXPENDITURE CATEGORIES Salanes/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Gifts/Awards/Memorial Expense Advertising Expense Accounting/Banking Legal Services Consulting Expense Event Expense Food/Beverage Expense Travel In District Contributions/Donations Made By Candidate/Officeholder/Political Committee Travel Out Of District Polling Expense Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 PAGE# 2 FILER NAME 3 ACCOUNT # (TEC filers) Cole, Sheryl (Mrs.) 00001564 Schedule: 8/9 Report: 35/37 5 Payee name Date Staples 05/12/2012 6 Amount (\$) 7 Payee address City; State; Zip Code 1201 Barbara Jordan \$462.00 Austin, TX 78723 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 **PURPOSE** Office Overhead/Rental Expense supplies OF **EXPENDITURE** Candidate / Officeholder name Office held: 9 Complete ONLY if Office sought: direct expenditure to benefit C/OH Date Payee name Team Management 05/12/2012 Amount (\$) Payee address City; State; Zip Code 5114 Balcones Woods Dr. \$4,000.00 Austin, TX 78759 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** Consulting Expense consulting fees OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Pavee name 05/12/2012 **US Postal Service** Amount (\$) Payee address City; State; Zip Code \$124.00 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** Office Overhead/Rental Expense postage OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 05/06/2012 Victory Grill Amount (\$) Payee address City; State; Zip Code 1028 E. 11th \$250.00 Austin, TX 78703 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE Event Expense** event **QF EXPENDITURE**

Office held:

Office sought:

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

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

EXPENDITURE CATEGORIES Salanes/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense

Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Fees Printing Expense Office Overhead/Rental Expense The INSTRUCTION GUIDE explains how to complete this form. 1 PAGE# 2 FILER NAME 3 ACCOUNT # (TEC filers) Cole, Sheryl (Mrs.) Schedule: 9/9 Report: 36/37 00001564 4 Date 5 Payee name 05/12/2012 Victory Grill Payee address City; State; Zip Code 6 Amount (\$) 1028 E. 11th \$450.00 Austin, TX 78703 (a) Category (See Categories listed at the top of this schedule) (b) Description 8 (If travel outside of Texas, complete Schedule T) **PURPOSE** Event Expense event **EXPENDITURE** 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 05/04/2012 Word of Mouth Payee address City; State; Zip Code Amount (\$) 919 West 12th \$497.55 Austin, TX 78701 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Food/Beverage Expense catering OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office held: Office sought: direct expenditure to benefit C/OH Payee name Date 05/04/2012 Word of Mouth Amount (\$) Payee address City; State; Zip Code 919 West 12th \$1,076.19 Austin, TX 78701 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Food/Beverage Expense catering OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 05/09/2012 Worley Printing Payee address City; State; Zip Code Amount (\$) 3217 IH 35 \$37.96 Austin, TX 78722 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE Printing Expense** stickers OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH

PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

SCHEDULE H

Advertising Expense Accounting/Banking Consulting Expense

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

EXPENDITURE CATEGORIES Salanes/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Travel Out Of District
Office Overhead/Rental Expense Printing Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 2 FILER NAME 1 PAGE# 3 ACCOUNT # (TEC filers) Cole, Sheryl (Mrs.) 00001564 Schedule: 1/1 Report: 37/37 5 Business name 4 Date 05/12/2012 AT&T 6 Amount (\$) Business address City; State; Zip Code P O Box 65074 \$139.84 Dallas, TX 75265-0574 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Office Overhead/Rental Expense Phone bill OF EXPENDITURE 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH