

FORM C/OH
COVER SHEET PG 1

Electronic Filing Version 3.4.6

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS****FORM C/OH
COVER SHEET PG 2****13 C/OH NAME** Tovo, Kathrynne (Ms.)**14 ACCOUNT #** (Ethics Commission filers)
00005000**15 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****COMMITTEE CAMPAIGN TREASURER ADDRESS**☐ additional pages**16 CONTRIBUTION
TOTALS**1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN
PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$

0.00

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

\$

45,466.00

**EXPENDITURE
TOTALS**

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

\$

0.00

4. TOTAL POLITICAL EXPENDITURES

\$

76,737.83

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

\$

64,802.71

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

\$

141,807.06

17 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 Kathrynne B. TOVO, this the 6th day
of Oct, 2014, to certify which, witness my hand and seal of office.

Jannette Sue Goodall Jannette Sue Goodall Notary
Signature of officer administering oath Print name of officer administering oath Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 1/58 Report: 3/89

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

09/20/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Alvis, Grant (Mr.)

6 Contributor address; City; State; Zip Code
4002 Petes Path
Austin, TX 78731

7 Amount of
contribution (\$)

\$150.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

09/22/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
American Federation of State, County and Municipal Employees

Contributor address; City; State; Zip Code
1625 L Street, NW
Washington, DC 20036

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/15/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Anderson, Maurice (Mr.)

Contributor address; City; State; Zip Code
3901 Arbor Glen Way
Austin, TX 78731

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Contractor

Employer (See Instructions)
M.F. Anderson Construction Inc.

Date

09/16/2014

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

Contributor address; City; State; Zip Code
2318 Canterbury St
Austin, TX 78702

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Consultant

Employer (See Instructions)
Structure Development

Date

09/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Anthony, Dana (Ms.)

Contributor address; City; State; Zip Code
709 31 St
Austin, TX 78705

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/58 Report: 4/89	
2 FILER NAME Tovo, Kathryn (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 09/14/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Aparicio, Eduardo (Mr.) 6 Contributor address; City; State; Zip Code 9906 Dorset Dr Austin, TX 78753	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) Owner/President		10 Employer (See Instructions) Aparicio Publishing	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Baccus, Richard (Mr.) Contributor address; City; State; Zip Code 11504 Oakwood Dr. Austin, TX 78753	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 08/07/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bailey, Debra (Ms.) Contributor address; City; State; Zip Code 8500 Andreas Cove Austin, TX 78759	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 07/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bailey, Kris (Mr.) Contributor address; City; State; Zip Code 8418 Spring Valley Dr Austin, TX 78736	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) Insurance Adjuster		Employer (See Instructions) Self-Employed	
Date 07/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bailey, Pam (Ms.) Contributor address; City; State; Zip Code 8204 Red Willow Dr Austin, TX 78736	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: 3/58 Report: 5/89

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

09/14/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Balaka, Gerald (Mr.)

6 Contributor address; City; State; Zip Code
1800 W 34th St
Austin, TX 78703

7 Amount of
contribution (\$)

\$100.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

08/26/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Barrett, Rick (Mr.)

Contributor address; City; State; Zip Code
16606 Sperry Gardens Dr
Houston, TX 77095

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
President

Employer (See Instructions)
Greater Houston Transportation

Date

07/17/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Bartz, Joan (Ms.)

Contributor address; City; State; Zip Code
6713 Tulsa Cove
Austin, TX 78723

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/17/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Basciano, Joyce (Ms.)

Contributor address; City; State; Zip Code
1907 W 34th St.
Austin, TX 78703

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
N/A

Date

09/14/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Basciano, Joyce (Ms.)

Contributor address; City; State; Zip Code
1907 W 34th St.
Austin, TX 78703

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

(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 # Schedule: 4/58 Report: 6/89	
2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 09/24/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Beinecke, Bridgette (Ms.) 6 Contributor address; City; State; Zip Code 2320 Tom Miller St Austin, TX 78723	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) Architectural Project Manager		10 Employer (See Instructions) Beinecke Preservation Planning and Project Management	
Date 07/05/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Berry, Clare (Ms.) Contributor address; City; State; Zip Code 1505 Brentwood Austin, TX 78757	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 07/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bilodeau, James (Mr.) Contributor address; City; State; Zip Code 502 E. Mary 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) Owner		Employer (See Instructions) PreFix Inc.	
Date 07/17/2014	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 (\$) \$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) CPA		Employer (See Instructions) State of Texas	
Date 09/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bornstein, Sue (Ms.) Contributor address; City; State; Zip Code 909 Post Oak St. 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) Physician		Employer (See Instructions) PATH Advantage Associated	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 5/58 Report: 7/89

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

09/24/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Boston, David (Mr.)

6 Contributor address; City; State; Zip Code
4004 Vineland Dr.
Austin, TX 78722

7 Amount of
contribution (\$)

\$100.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

09/17/2014

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

Contributor address; City; State; Zip Code
7509 Stepdawn Cove
Austin, TX 78731

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/31/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Brown, Lisa (Ms.)

Contributor address; City; State; Zip Code
P.O. Box 4767
Austin, TX 78765

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/23/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Brown, Lucy (Ms.)

Contributor address; City; State; Zip Code
1616 Westlake Dr
Austin, TX 78746

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Real estate investor

Employer (See Instructions)
Self-employed

Date

09/22/2014

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

Contributor address; City; State; Zip Code
4213 Ave. F
Austin, TX 78751

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 6/58 Report: 8/89

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

08/17/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Browning, Molly (Ms.)

6 Contributor address; City; State; Zip Code
1209 Bickler Rd
Austin, TX 78704

7 Amount of
contribution (\$)

\$30.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

09/24/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Buoy, Kang (Mr.)

Contributor address; City; State; Zip Code
514 Ladin Ln
Lakeway, TX 78734

Amount of
contribution (\$)

\$175.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/24/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Buoy, Savy (Mr.)

Contributor address; City; State; Zip Code
514 Ladin Ln
Lakeway, TX 78734

Amount of
contribution (\$)

\$175.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/15/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Burnham, Joan (Ms.)

Contributor address; City; State; Zip Code
4004 Avenue H
Austin, TX 78751

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Butler, Joy (Ms.)

Contributor address; City; State; Zip Code
2028 Emma Long Street
Austin, TX 78723

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

(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: 7/58 Report: 9/89

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

07/15/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Buttrey, Barbara (Ms.)

6 Contributor address; City; State; Zip Code
103 West 33rd
Austin, TX 78705

7 Amount of
contribution (\$)

\$50.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

09/24/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Buttrey, Barbara (Ms.)

Contributor address; City; State; Zip Code
103 West 33rd
Austin, TX 78705

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/15/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Buttrey, Jerrold (Mr.)

Contributor address; City; State; Zip Code
103 West 33rd
Austin, TX 78705

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/24/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Buttrey, Jerrold (Mr.)

Contributor address; City; State; Zip Code
103 W 33rd St
Austin, TX 78705

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/17/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Cabaniss, Boyce (Mr.)

Contributor address; City; State; Zip Code
209 East Elizabeth
Austin, TX 78704

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/58 Report: 10/89	
2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 08/02/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cabluck, Ellen (Ms.) 6 Contributor address; City; State; Zip Code 1808 Eva 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 08/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cabluck, Harry (Mr.) Contributor address; City; State; Zip Code 1808 Eva St 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 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cain, Elizabeth (Ms.) Contributor address; City; State; Zip Code 3011 West Ave Austin, TX 78705	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 07/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cannatti, Mike (Mr.) Contributor address; City; State; Zip Code 2100 Stamford Ln. Austin, TX 78703	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) Attorney		Employer (See Instructions) Terrile, Cannatti, Chambers & Holland, LLP	
Date 07/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cartlidge, Ron (Mr.) Contributor address; City; State; Zip Code 1802 Woodland Ave Austin, TX 78741	Amount of contribution (\$) \$20.00	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: 9/58 Report: 11/89

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

07/17/2014

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

6 Contributor address; City; State; Zip Code
1802 Woodland Ave
Austin, TX 78741

7 Amount of
contribution (\$)

\$20.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

08/01/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Catterall, Kate (Ms.)

Contributor address; City; State; Zip Code
408 West Johanna St
Austin, TX 78704

Amount of
contribution (\$)

\$20.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/01/2014

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

Contributor address; City; State; Zip Code
408 West Johanna St
Austin, TX 78704

Amount of
contribution (\$)

\$20.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/11/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Chafetz, Norm (Mr.)

Contributor address; City; State; Zip Code
11000 Rustic Manor Ln
Austin, TX 78750

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Cocke, Paula (Ms.)

Contributor address; City; State; Zip Code
1608 West Ninth Street
Austin, TX 78703

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Consultant

Employer (See Instructions)
Self-employed

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 10/58 Report: 12/89

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

07/16/2014

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

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

7 Amount of
contribution (\$)

\$25.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

09/24/2014

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

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

Amount of
contribution (\$)

\$102.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Cole, Allan (Mr.)

Contributor address; City; State; Zip Code
803 Park Blvd
Austin, TX 78704

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Professor/Associate Dean

Employer (See Instructions)
UT Austin

Date

07/03/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Conner, David (Mr.)

Contributor address; City; State; Zip Code
3820 Avenue F
Austin, TX 78751

Amount of
contribution (\$)

\$15.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Conner, David (Mr.)

Contributor address; City; State; Zip Code
3820 Avenue F
Austin, TX 78751

Amount of
contribution (\$)

\$10.00

In-kind contribution
description (if applicable)

(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: 11/58 Report: 13/89

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

09/16/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Cooper, Lanette (Ms.)

6 Contributor address; City; State; Zip Code
5008 Eilers Ave
Austin, TX 78751

7 Amount of
contribution (\$)

\$25.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

09/23/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Courtade, Alexander (Mr.)

Contributor address; City; State; Zip Code
609 W 35th St
Austin, TX 78705

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Cowden, Chris (Ms.)

Contributor address; City; State; Zip Code
1604 Leigh
Austin, TX 78703

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Art Gallery Director

Employer (See Instructions)
Women and Their Work

Date

07/17/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Crow, Dan (Mr.)

Contributor address; City; State; Zip Code
2803 Down Cove
Austin, TX 78704

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
N/A

Date

09/23/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Crow, Lindsey (Ms.)

Contributor address; City; State; Zip Code
3018 West Ave.
Austin, TX 78705

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 12/58 Report: 14/89

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

08/25/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Crow, Steven (Mr.)

6 Contributor address; City; State; Zip Code
3018 West Ave.
Austin, TX 78705

7 Amount of
contribution (\$)

\$100.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

08/02/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Crumpton, Carolyn (Ms.)

Contributor address; City; State; Zip Code
4808 Avenue F
Austin, TX 78751

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Psychologist

Employer (See Instructions)
Self-employed

Date

09/24/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Curry, Michael (Mr.)

Contributor address; City; State; Zip Code
700 Lavaca
Suite 1400
Austin, TX 78701

Amount of
contribution (\$)

\$150.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Mediator

Employer (See Instructions)
Self-employed

Date

09/19/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
DasGupta, Sumit (Mr.)

Contributor address; City; State; Zip Code
8900 Bluegrass Dr
Austin, TX 78759

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
N/A

Date

09/25/2014

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

Contributor address; City; State; Zip Code
1506 West 31st St
Austin, TX 78703

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 13/58 Report: 15/89

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

09/20/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Dileo, Michael (Mr.)

6 Contributor address; City; State; Zip Code
9 Niles Rd
Austin, TX 78703

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
Teacher

10 Employer (See Instructions)
Austin Waldorf School

Date

09/22/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Dittmar, Ronald (Mr.)

Contributor address; City; State; Zip Code
904 Ebony
Austin, TX 78704

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Doherty, Penelope (Ms.)

Contributor address; City; State; Zip Code
914 E 49th St
Austin, TX 78751

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/18/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Downer, Jane (Ms.)

Contributor address; City; State; Zip Code
517 East Mary
Austin, TX 78704

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/16/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Dunn, Beverly (Ms.)

Contributor address; City; State; Zip Code
607 Patterson Ave.
Austin, TX 78703

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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

1 PAGE #

Schedule: 14/58 Report: 16/89

2 FILER NAME Tovo, Kathryn (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

09/10/2014

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

6 Contributor address; City; State; Zip Code
1204 Brentwood Rd
Austin, TX 78722

7 Amount of contribution (\$)

\$25.00

8 In-kind contribution description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

09/22/2014

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

Contributor address; City; State; Zip Code
1704 W Ave.
Austin, TX 78701

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/16/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Embree, Alice (Ms.)

Contributor address; City; State; Zip Code
1210 Norwood Rd.
Austin, TX 78722

Amount of contribution (\$)

\$20.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/20/2014

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

Contributor address; City; State; Zip Code
2400 Elm Glen
Austin, TX 78704

Amount of contribution (\$)

\$350.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

N/A

Date

07/17/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Fath, Shudde (Ms.)

Contributor address; City; State; Zip Code
1006 Bluebonnet Ln
Austin, TX 78704

Amount of contribution (\$)

\$350.00

In-kind contribution description (if applicable)

(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 # Schedule: 15/58 Report: 17/89	
2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 07/31/2014	5 Full name of contributor <input type="checkbox"/> 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 (\$) \$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 09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ferguson, Frances (Ms.) Contributor address; City; State; Zip Code 1013 Harwood Place 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 09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fink, Tom (Mr.) Contributor address; City; State; Zip Code 2607 S. 3rd St 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 09/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Finnell, Susanna (Ms.) Contributor address; City; State; Zip Code 700 West Monroe St 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 09/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fiske, Patricia (Ms.) Contributor address; City; State; Zip Code 2601 Del Curto Rd #103 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) 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 #

Schedule: 16/58 Report: 18/89

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

08/13/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Flores, Nicole (Ms.)

6 Contributor address; City; State; Zip Code
312 Eanes School Rd
Austin, TX 78746

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
Senior Vice President

10 Employer (See Instructions)
City Real Estate Advisors Inc.

Date

09/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Fries, Mark (Mr.)

Contributor address; City; State; Zip Code
4105 Avenue B
Austin, TX 78751

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/03/2014

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

Contributor address; City; State; Zip Code
715 Carolyn Ave.
Austin, TX 78705

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Manager

Employer (See Instructions)
Republic National Distributing Co.

Date

09/02/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Gaston, Merianne (Ms.)

Contributor address; City; State; Zip Code
715 Carolyn Ave.
Austin, TX 78705

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/27/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Gealy, Susanne (Ms.)

Contributor address; City; State; Zip Code
3310 Bryker Dr.
Austin, TX 78703

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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

1 PAGE #

Schedule: 17/58 Report: 19/89

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

09/10/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Gest, Darrell (Mr.)

6 Contributor address; City; State; Zip Code
1204 Brentwood Rd
Austin, TX 78722

7 Amount of
contribution (\$)

\$25.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

09/20/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Gettelman, Barbara (Ms.)

Contributor address; City; State; Zip Code
505 Lockhart Dr
Austin, TX 78704

Amount of
contribution (\$)

\$30.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/14/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Gill, Hubert (Mr.)

Contributor address; City; State; Zip Code
1707 Palma Plaza
Austin, TX 78703

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Self-employed

Date

09/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Gillespie, Alexandra (Ms.)

Contributor address; City; State; Zip Code
909 Post Oak St.
Austin, TX 78704

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Physician

Employer (See Instructions)
PATH Advantage Associated

Date

08/26/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Gimson, Susana (Ms.)

Contributor address; City; State; Zip Code
610 Harthan St
Austin, TX 78703

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 18/58 Report: 20/89	
2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 09/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Girard, Denise (Ms.) 6 Contributor address; City; State; Zip Code 4520 Red River St 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 08/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gonzalez, Israel (Mr.) Contributor address; City; State; Zip Code 3501 Manor Rd Austin, TX 78723	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) Civil Engineer/Land Surveyor		Employer (See Instructions) IT Gonzalez Engineers	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Goodman, Kim (Ms.) Contributor address; City; State; Zip Code 4416 Sam Bass Rd. Round Rock, TX 78681	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 07/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gordon, William (Mr.) Contributor address; City; State; Zip Code 6103 Cary Dr. Austin, TX 78757	Amount of contribution (\$) \$40.00	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 09/11/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gosselink, Margaret (Ms.) Contributor address; City; State; Zip Code 903 West 14th St Austin, TX 78701	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)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 19/58 Report: 21/89

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

09/20/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Grady-Sessa, Ellen (Ms.)

6 Contributor address; City; State; Zip Code
813 James St
Austin, TX 78704

7 Amount of
contribution (\$)

\$150.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

07/31/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Greenberg, Alan (Mr.)

Contributor address; City; State; Zip Code
5400 Woodview Ave
Austin, TX 78756

Amount of
contribution (\$)

\$60.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/16/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Guerra, Luis (Mr.)

Contributor address; City; State; Zip Code
1808 Kerr St
Austin, TX 78704

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Manager

Employer (See Instructions)
Self-employed

Date

07/06/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Guerrero, Linda (Ms.)

Contributor address; City; State; Zip Code
3204 Fairfax Walk
Austin, TX 78705

Amount of
contribution (\$)

\$65.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Guerrero, Linda (Ms.)

Contributor address; City; State; Zip Code
3204 Fairfax Walk
Austin, TX 78705

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

(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: 20/58 Report: 22/89

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

09/21/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Guthikonda, Amini (Ms.)

6 Contributor address; City; State; Zip Code
P.O. Box 200388
Austin, TX 78720

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
Yoga Instructor/Student

10 Employer (See Instructions)
Self-employed

Date

09/21/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Guthikonda, Gopal (Mr.)

Contributor address; City; State; Zip Code
P.O. Box 200388
Austin, TX 78720

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Engineer

Employer (See Instructions)
CP&Y Inc.

Date

09/05/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Hall, Elizabeth (Ms.)

Contributor address; City; State; Zip Code
2509 Hartford Rd
Austin, TX 78703

Amount of
contribution (\$)

\$175.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/05/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Hall, Michael (Mr.)

Contributor address; City; State; Zip Code
2509 Hartford Rd
Austin, TX 78703

Amount of
contribution (\$)

\$175.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/01/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Hanlon, Ellie (Ms.)

Contributor address; City; State; Zip Code
4801 Caswell Ave
Austin, TX 78751

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 21/58 Report: 23/89

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

07/18/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Hanna, Jett (Mr.)

6 Contributor address; City; State; Zip Code
6112 Highlandale Dr.
Austin, TX 78731

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
Attorney

10 Employer (See Instructions)
Texas Lawyers' Insurance

Date

09/21/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Harden, Joi (Ms.)

Contributor address; City; State; Zip Code
10507 Cooper Hill Dr.
Austin, TX 78758

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Harriman, Suzie (Ms.)

Contributor address; City; State; Zip Code
2304 Euclid Ave.
Austin, TX 78704

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/31/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Harris, Lisa (Ms.)

Contributor address; City; State; Zip Code
4522 Avenue F
Austin, TX 78751

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/24/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Harry, Thomas (Mr.)

Contributor address; City; State; Zip Code
606 West Lynn St #10
Austin, TX 78703

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Professor/Physician

Employer (See Instructions)
Texas A&M/Baylor, Scott & White Hospital

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 22/58 Report: 24/89

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

08/26/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Harter, Steven (Mr.)

6 Contributor address; City; State; Zip Code
8 Winston Woods Dr
Houston, TX 77024

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
Chairman

10 Employer (See Instructions)
Texas Taxi, Inc.

Date

08/26/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Harter, Suzanne (Ms.)

Contributor address; City; State; Zip Code
8 Winston Woods Dr
Houston, TX 77024

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Homemaker

Employer (See Instructions)
N/A

Date

09/16/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Harutunian, Anne (Ms.)

Contributor address; City; State; Zip Code
P.O. Box W
Austin, TX 78713

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Marketing Director

Employer (See Instructions)
Harutunian Engineering, Inc.

Date

09/12/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Harutunian, Kegham (Mr.)

Contributor address; City; State; Zip Code
21 Stillmeadow
Round Rock, TX 78664

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Electrical Engineer

Employer (See Instructions)
Harutunian Engineering, Inc.

Date

09/12/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Harutunian, Shant (Mr.)

Contributor address; City; State; Zip Code
21 Stillmeadow
Round Rock, TX 78664

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Electrical Engineer

Employer (See Instructions)
Harutunian Engineering, Inc.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 23/58 Report: 25/89	
2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 09/16/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harutunian, Takoohy (Mr.) 6 Contributor address; City; State; Zip Code P.O. Box W Austin, TX 78713	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) CEO		10 Employer (See Instructions) Harutunian Engineering, Inc.	
Date 09/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harutunian, Vigain (Mr.) Contributor address; City; State; Zip Code 21 Stillmeadow Round Rock, TX 78664	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) Mechanical Engineer		Employer (See Instructions) Harutunian Engineering, Inc.	
Date 09/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hatch, Donald (Mr.) Contributor address; City; State; Zip Code 2101 Newton 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 07/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hatch, Tom (Mr.) Contributor address; City; State; Zip Code 1102-B East 8th St Austin, TX 78702	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) Hatch, Ulland, Owen Architects	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hatfield, Richard (Mr.) Contributor address; City; State; Zip Code 5403 Musket Ridge Austin, TX 78759	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: 24/58 Report: 26/89	
2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 09/14/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Heath, Jena (Ms.) 6 Contributor address; City; State; Zip Code 6514 Santolina Cove Austin, TX 78731	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 09/25/2014	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 (\$) \$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 07/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Herczeg, Laszlo (Mr.) Contributor address; City; State; Zip Code 5003 Spicewood Springs Rd Austin, TX 78759	Amount of contribution (\$) \$199.00	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 08/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Herndon, David (Mr.) Contributor address; City; State; Zip Code 2903 Tarry Trail Austin, TX 78703	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 08/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Herndon, Dealey (Ms.) Contributor address; City; State; Zip Code 2903 Tarry Trail Austin, TX 78703	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)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 25/58 Report: 27/89

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

07/15/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Hibbetts, Alegria Arce (Ms.)

6 Contributor address; City; State; Zip Code
110 West 33rd St
Austin, TX 78705

7 Amount of
contribution (\$)

\$50.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
CPA

10 Employer (See Instructions)
Self

Date

07/15/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Hibbetts, Charles (Mr.)

Contributor address; City; State; Zip Code
110 West 33rd St
Austin, TX 78705

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/26/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Hill, Jo Vanna (Ms.)

Contributor address; City; State; Zip Code
6410 Oak Masters Dr
Spring, TX 77379

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Homemaker

Employer (See Instructions)
N/A

Date

08/26/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Hill, Martyn (Mr.)

Contributor address; City; State; Zip Code
6410 Oak Masters Dr
Spring, TX 77379

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Pagel, David & Hill, PC

Date

09/17/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Hinckley Boyle, Carolyn (Ms.)

Contributor address; City; State; Zip Code
7509 Stepdown Cove
Austin, TX 78731

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

(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: 26/58 Report: 28/89	
2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 07/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hoberman, Louisa (Ms.) 6 Contributor address; City; State; Zip Code 2637 West 49th St Austin, TX 78731	7 Amount of contribution (\$) \$20.00	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 09/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hoffman, Lisa (Ms.) Contributor address; City; State; Zip Code 5102 Avenue G Austin, TX 78758	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 07/24/2014	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) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) Seton Family of Hospitals	
Date 09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Islam, Rashed (Mr.) Contributor address; City; State; Zip Code 11901 Palisades Pkwy Austin, TX 78732	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 08/28/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ivey, Virginia (Ms.) Contributor address; City; State; Zip Code 504 Pecan Grove Rd Austin, TX 78704	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)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 27/58 Report: 29/89

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

07/22/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Jansa, Ruth (Ms.)

6 Contributor address; City; State; Zip Code
4713 Duval St
Austin, TX 78751

7 Amount of
contribution (\$)

\$40.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

09/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Jimenez, Kisla (Ms.)

Contributor address; City; State; Zip Code
3012 West Ave.
Austin, TX 78705

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/18/2014

Full name of contributor ☐ 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 (\$)

\$250.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Legal Aid

Employer (See Instructions)
Texas Rio Grande Legal Aid

Date

07/01/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Jones, Christina (Ms.)

Contributor address; City; State; Zip Code
3912 Mattie St
Austin, TX 78723

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/03/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Jones, Russell (Mr.)

Contributor address; City; State; Zip Code
808 East 30th St Unit C
Austin, TX 78705

Amount of
contribution (\$)

\$150.00

In-kind contribution
description (if applicable)

(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: 28/58 Report: 30/89

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

09/04/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Justice, Ellen (Ms.)

6 Contributor address; City; State; Zip Code
802 Winflo Dr.
Austin, TX 78703

7 Amount of
contribution (\$)

\$100.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

07/08/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Kaler, Robert (Mr.)

Contributor address; City; State; Zip Code
207 East 34th St
Austin, TX 78705

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/03/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Kallendorf Speer, Carol (Ms.)

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

Amount of
contribution (\$)

\$175.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/27/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Kargbo, Christy (Ms.)

Contributor address; City; State; Zip Code
8834 Honeysuckle Tr
Austin, TX 78759

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Owner/Instructor

Employer (See Instructions)
TKO Swim

Date

08/27/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Kargbo, Edward (Mr.)

Contributor address; City; State; Zip Code
8834 Honeysuckle Tr
Austin, TX 78759

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
President

Employer (See Instructions)
Yellow Cab Austin

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 29/58 Report: 31/89

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

07/02/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Karoly, David (Mr.)

6 Contributor address; City; State; Zip Code
2610 Friar Tuck Lane
Austin, TX 78704

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
Engineer

10 Employer (See Instructions)
Cirrus Logic

Date

09/20/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Keeton, Carole (Ms.)

Contributor address; City; State; Zip Code
2904 Bowman Ave
Austin, TX 78703

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Consultant

Employer (See Instructions)
Self-employed

Date

09/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Kelly, Karen (Ms.)

Contributor address; City; State; Zip Code
3701 Bonnie Rd
Austin, TX 78703

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Family Partner

Employer (See Instructions)
Self-employed

Date

08/01/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Kelly, Mike (Mr.)

Contributor address; City; State; Zip Code
2603 Carnarvon Ln
Austin, TX 78704

Amount of
contribution (\$)

\$40.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/01/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Kendall, Joseph (Mr.)

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

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 30/58 Report: 32/89

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

09/25/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Kennedy, Sara (Ms.)

6 Contributor address; City; State; Zip Code
4105 Avenue B
Austin, TX 78751

7 Amount of
contribution (\$)

\$150.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

09/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Kern, Paulette (Ms.)

Contributor address; City; State; Zip Code
2705 Twin Oaks
Austin, TX 78757

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/24/2014

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

Contributor address; City; State; Zip Code
1000 E Cesar Chavez
Austin, TX 78702

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/17/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Kim, Paul (Mr.)

Contributor address; City; State; Zip Code
10524 Roy Butler Dr.
Austin, TX 78717

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
President

Employer (See Instructions)
ATX Environmental Solutions

Date

07/17/2014

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

Contributor address; City; State; Zip Code
10524 Roy Butler Dr.
Austin, TX 78717

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Homemaker

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 #

Schedule: 31/58 Report: 33/89

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

09/25/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
King, David (Mr.)

6 Contributor address; City; State; Zip Code
1808 Kerr St
Austin, TX 78704

7 Amount of
contribution (\$)

\$150.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

08/29/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Kirkpatrick, Mark (Mr.)

Contributor address; City; State; Zip Code
718 Patterson Ave.
Austin, TX 78703

Amount of
contribution (\$)

\$150.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Kuykendall, Chris (Mr.)

Contributor address; City; State; Zip Code
4100 Avenue C, No 103
Austin, TX 78751

Amount of
contribution (\$)

\$125.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/07/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Kyle, Catherine (Ms.)

Contributor address; City; State; Zip Code
2700 Mountain Laurel Ln
Austin, TX 78703

Amount of
contribution (\$)

\$125.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/01/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Labow, Joanna (Ms.)

Contributor address; City; State; Zip Code
2530 Longview
Austin, TX 78705

Amount of
contribution (\$)

\$30.00

In-kind contribution
description (if applicable)

(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: 32/58 Report: 34/89	
2 FILER NAME Tovo, Kathryne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 07/15/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Langenberg, Christy Krames (Ms.) 6 Contributor address; City; State; Zip Code 1802 Vance Cir Austin, TX 78701	7 Amount of contribution (\$) \$125.00	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 07/15/2014	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 (\$) \$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) Attorney		Employer (See Instructions) Scott, Douglass & McConnico, LLP	
Date 09/25/2014	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) Attorney		Employer (See Instructions) Scott, Douglass & McConnico, LLP	
Date 07/28/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lawrence, Kathleen (Ms.) Contributor address; City; State; Zip Code 4103 Avenue 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 07/28/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lazar, Jennifer (Ms.) Contributor address; City; State; Zip Code 806 West 28 1/2 St Austin, TX 78705	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)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 33/58 Report: 35/89

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

09/04/2014

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

6 Contributor address; City; State; Zip Code
802 Winflo Dr
Austin, TX 78703

7 Amount of
contribution (\$)

\$100.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

09/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Levinski, Bobby (Mr.)

Contributor address; City; State; Zip Code
3979 River Place Blvd
Austin, TX 78730

Amount of
contribution (\$)

\$125.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/17/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Lewis, Dawn (Ms.)

Contributor address; City; State; Zip Code
4509 Edgemont Dr
Austin, TX 78731

Amount of
contribution (\$)

\$75.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/17/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Lewis, Fred (Mr.)

Contributor address; City; State; Zip Code
4509 Edgemont Dr
Austin, TX 78731

Amount of
contribution (\$)

\$75.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Lewis, Kevin (Mr.)

Contributor address; City; State; Zip Code
1002 Bouldin Ave.
Austin, TX 78704

Amount of
contribution (\$)

\$300.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Buyer

Employer (See Instructions)
Whole Earth Provision Co.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 34/58 Report: 36/89

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

08/31/2014

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

6 Contributor address; City; State; Zip Code
908 Calle Limon
Austin, TX 78702

7 Amount of
contribution (\$)

\$20.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

09/25/2014

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

Contributor address; City; State; Zip Code
908 Calle Limon
Austin, TX 78702

Amount of
contribution (\$)

\$20.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/27/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Little, Emily (Ms.)

Contributor address; City; State; Zip Code
1001 East 8th St
Austin, TX 78702

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Lowerre, Richard (Mr.)

Contributor address; City; State; Zip Code
725 Patterson
Austin, TX 78703

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Lowerre, Frederick, Perales, Allmon & Rockwell

Date

09/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
MacLaine, Nancy (Ms.)

Contributor address; City; State; Zip Code
2302 Del Curto Rd
Austin, TX 78704

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Software tester

Employer (See Instructions)
Imperva

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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

1 PAGE #

Schedule: 35/58 Report: 37/89

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

08/05/2014

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

6 Contributor address; City; State; Zip Code
11 Niles Rd
Austin, TX 78703

7 Amount of contribution (\$)

\$350.00

8 In-kind contribution description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
CEO

10 Employer (See Instructions)
Appconomy

Date

08/01/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mahon, Keith (Mr.)

Contributor address; City; State; Zip Code
38 Silver Maple Place
The Woodlands, TX 77382

Amount of contribution (\$)

\$350.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)
Geologist

Employer (See Instructions)
Anadarko

Date

09/09/2014

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

Contributor address; City; State; Zip Code
4320 Scales St
Austin, TX 78723

Amount of contribution (\$)

\$25.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/22/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Martin, Carol (Ms.)

Contributor address; City; State; Zip Code
1901 Travis Heights Blvd
Austin, TX 78704

Amount of contribution (\$)

\$50.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/05/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Martin, Cecile (Ms.)

Contributor address; City; State; Zip Code
411 Meadowlakes Dr
Meadowlakes, TX 78654

Amount of contribution (\$)

\$350.00

In-kind contribution description (if applicable)

(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 #

Schedule: 36/58 Report: 38/89

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

09/07/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Martin, Sam (Mr.)

6 Contributor address; City; State; Zip Code
1901 Travis Heights Blvd
Austin, TX 78704

7 Amount of
contribution (\$)

\$200.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
State Employee

10 Employer (See Instructions)
Teacher Retirement System of Texas

Date

08/26/2014

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

Contributor address; City; State; Zip Code
510 East 7th
Houston, TX 77007

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Homemaker

Employer (See Instructions)
N/A

Date

08/26/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Martinez, Roman (Mr.)

Contributor address; City; State; Zip Code
510 East 7th
Houston, TX 77007

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
President

Employer (See Instructions)
Texas Taxi, Inc.

Date

09/11/2014

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 (\$)

\$150.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/02/2014

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

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

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 37/58 Report: 39/89

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

07/30/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Mayton, Emma Lea (Ms.)

6 Contributor address; City; State; Zip Code
7101 Daugherty St.
Austin, TX 78757

7 Amount of
contribution (\$)

\$40.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

09/20/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
McAfee, Melanie (Ms.)

Contributor address; City; State; Zip Code
4120 Mattie St
Austin, TX 78754

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Special Events

Employer (See Instructions)
Barr Mansion

Date

08/28/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
McCrack, Christopher (Mr.)

Contributor address; City; State; Zip Code
1709 Bouldin Ave.
Austin, TX 78704

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/15/2014

Full name of contributor ☐ 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) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/14/2014

Full name of contributor ☐ 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) ☐

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: 38/58 Report: 40/89

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

09/25/2014

5 Full name of contributor ☐ 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 (\$)

\$50.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

07/12/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
McHorse, Cathy (Ms.)

Contributor address; City; State; Zip Code
5202 Turnabout Ln
Austin, TX 78731

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/20/2014

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

Contributor address; City; State; Zip Code
613 West 33rd St
Austin, TX 78705

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
N/A

Date

09/23/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
McMurtry, Alan (Mr.)

Contributor address; City; State; Zip Code
5901 Cary Dr
Austin, TX 78757

Amount of
contribution (\$)

\$300.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Wholesaler

Employer (See Instructions)
AMC Company

Date

09/23/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
McMurtry, Nancy (Ms.)

Contributor address; City; State; Zip Code
5901 Cary Dr
Austin, TX 78757

Amount of
contribution (\$)

\$300.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Bookkeeper

Employer (See Instructions)
AMC Company

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 39/58 Report: 41/89	
2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 09/14/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Meisenbach, Albert (Mr.) 6 Contributor address; City; State; Zip Code 1800 San Gabriel St. 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 09/14/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Meisenbach, Megan (Mrs.) Contributor address; City; State; Zip Code 1800 San Gabriel St. 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 07/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Melancon, Rebecca (Ms.) Contributor address; City; State; Zip Code 509 East 38th St. Austin, TX 78705	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 09/14/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Merriam, Rosemary (Ms.) Contributor address; City; State; Zip Code 800 West Lynn Street Austin, TX 78703	Amount of contribution (\$) \$75.00	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 07/14/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mick, Dennis (Mr.) Contributor address; City; State; Zip Code 4305 Scales St Austin, TX 78723	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) None		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 #

Schedule: 40/58 Report: 42/89

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

09/25/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Millea, Susan (Ms.)

6 Contributor address; City; State; Zip Code
5806 Marilyn Dr
Austin, TX 78757

7 Amount of
contribution (\$)

\$25.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

09/22/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Miller, Deron (Mr.)

Contributor address; City; State; Zip Code
1308 Old 19th St
Austin, TX 78705

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/06/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Miller, Gayle (Ms.)

Contributor address; City; State; Zip Code
720 Park Blvd
Austin, TX 78751

Amount of
contribution (\$)

\$300.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Artist

Employer (See Instructions)
Self-employed

Date

09/22/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Miller, Marye (Ms.)

Contributor address; City; State; Zip Code
1308 Old 19th St
Austin, TX 78705

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/01/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Miller III, Laurence (Mr.)

Contributor address; City; State; Zip Code
P.O. Box 49130
Austin, TX 78765

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Director/President

Employer (See Instructions)
Baluarte Creek Inc.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 41/58 Report: 43/89

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

09/23/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Mills, Margaret (Ms.)

6 Contributor address: City: State: Zip Code
1704 E 40th St
Austin, TX 78722

7 Amount of
contribution (\$)

\$50.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

07/17/2014

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

Contributor address: City: State: Zip Code
P.O. Box 4023
Austin, TX 78767

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Securities Investment

Employer (See Instructions)
Self-Employed

Date

07/15/2014

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

Contributor address: City: State: Zip Code
1606 Pearl St
Austin, TX 78701

Amount of
contribution (\$)

\$10.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/26/2014

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

Contributor address: City: State: Zip Code
13600 Breton Ridge St Bldg 22A
Houston, TX 77070

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Pharmaceutical Rep

Employer (See Instructions)
Teva

Date

09/19/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Naeve, Chuck (Mr.)

Contributor address: City: State: Zip Code
6507 Lost Cove
Austin, TX 78746

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 42/58 Report: 44/89	
2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 09/07/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nixon, Mark (Mr.) 6 Contributor address; City; State; Zip Code 2700 Mountain Laurel Ln Austin, TX 78703	7 Amount of contribution (\$) \$125.00	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 08/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nuckols, Tom (Mr.) Contributor address; City; State; Zip Code 2910 Kassarine Pass 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) Travis County	
Date 07/05/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) O'Hara, Beverly (Ms.) Contributor address; City; State; Zip Code 555 East 5th Suit 2725 Austin, TX 78701	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) Retired		Employer (See Instructions) N/A	
Date 07/05/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) O'Hara, William (Mr.) Contributor address; City; State; Zip Code 555 East 5th Suit 2725 Austin, TX 78701	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) Retired		Employer (See Instructions) N/A	
Date 07/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Overton, Linda (Ms.) Contributor address; City; State; Zip Code 801 West Gibson St Austin, TX 78704	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)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 43/58 Report: 45/89	
2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 09/24/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pascoe, Neil (Mr.) 6 Contributor address; City; State; Zip Code 2502 Hartford Rd. 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 09/24/2014	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)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Patrick, Mary (Ms.) Contributor address; City; State; Zip Code 612 Genard St. 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 07/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Patterson, Bradford (Mr.) Contributor address; City; State; Zip Code 1311 Newton St. Austin, TX 78704	Amount of contribution (\$) \$75.00	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 09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Piche, Stephen (Mr.) Contributor address; City; State; Zip Code 508 Harris Ave. 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) Engineer		Employer (See Instructions) NeuCo	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 44/58 Report: 46/89	
2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 09/24/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pounds, Shannon (Ms.) 6 Contributor address; City; State; Zip Code 3304 Kerbey Ln 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 08/15/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Presti, Diane (Ms.) Contributor address; City; State; Zip Code 205 Park Ln 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) Attorney		Employer (See Instructions) None	
Date 09/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ramsey, Frances (Ms.) Contributor address; City; State; Zip Code 2401 Pemberton Place 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) Retired		Employer (See Instructions) N/A	
Date 07/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ratliff, Gay (Ms.) Contributor address; City; State; Zip Code 3509 Hampton Rd. 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) Interior Design		Employer (See Instructions) Gay Ratliff Interiors	
Date 07/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ratliff, Shannon (Mr.) Contributor address; City; State; Zip Code 3509 Hampton Rd. 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) Attorney		Employer (See Instructions) Ratliff Law	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 45/58 Report: 47/89

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

09/07/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Reddy, Ian (Mr.)

6 Contributor address; City; State; Zip Code
1924 Newning
Austin, TX 78704

7 Amount of
contribution (\$)

\$50.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

07/31/2014

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

Contributor address; City; State; Zip Code
816 Congress Ave. Suite 1200
Austin, TX 78701

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Self-employed

Date

08/31/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Rips, Geoff (Mr.)

Contributor address; City; State; Zip Code
1311 Ardenwood Rd
Austin, TX 78722

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/02/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Rivera, Jane (Ms.)

Contributor address; City; State; Zip Code
1000 Glen Oaks Ct.
Austin, TX 78702

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/20/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Roalson, Brad (Mr.)

Contributor address; City; State; Zip Code
2006 S. 2nd St
Austin, TX 78704

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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

1 PAGE #

Schedule: 46/58 Report: 48/89

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

09/20/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Roalson, Shay (Ms.)

6 Contributor address; City; State; Zip Code
2006 S, 2nd St
Austin, TX 78704

7 Amount of
contribution (\$)

\$100.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
Engineer

10 Employer (See Instructions)
HDR Engineering Inc

Date

08/26/2014

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

Contributor address; City; State; Zip Code
7515 Santa Fe Dr
Houston, TX 77061

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Vice President

Employer (See Instructions)
Texas Taxi, Inc.

Date

07/28/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Sanderson, Stephen (Mr.)

Contributor address; City; State; Zip Code
4103 Avenue F
Austin, TX 78751

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/18/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Saxena, Shubhada (Ms.)

Contributor address; City; State; Zip Code
67 St Stephens School Rd
Austin, TX 78746

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Social Work Student

Employer (See Instructions)
N/A

Date

09/13/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Scanlan, Nancy (Ms.)

Contributor address; City; State; Zip Code
4513 Balcones Dr.
Austin, TX 78731

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Photographer

Employer (See Instructions)
Self-employed

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 47/58 Report: 49/89

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

09/21/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Schneider, Robin (Ms.)

6 Contributor address; City; State; Zip Code
2609 Sherwood Ln.
Austin, TX 78704

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
Political Organizer

10 Employer (See Instructions)
Texas Campaign for the Environment

Date

07/01/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Schwitters, Karen (Ms.)

Contributor address; City; State; Zip Code
1115 West 7th St #300
Austin, TX 78703

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Seeger, Gary (Mr.)

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

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Management

Employer (See Instructions)
Infoglide, A FICO Company

Date

09/20/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Sessa, Robert (Mr.)

Contributor address; City; State; Zip Code
813 James St
Austin, TX 78704

Amount of
contribution (\$)

\$150.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/13/2014

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

Contributor address; City; State; Zip Code
2901 Windsor Rd
Austin, TX 78703

Amount of
contribution (\$)

\$150.00

In-kind contribution
description (if applicable)

(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: 48/58 Report: 50/89

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

08/01/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Shipley, Thomas (Mr.)

6 Contributor address; City; State; Zip Code
300 Bowie St #2503
Austin, TX 78703

7 Amount of
contribution (\$)

\$100.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

07/07/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Sibley, Jane (Ms.)

Contributor address; City; State; Zip Code
2210 Windsor Rd
Austin, TX 78703

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
N/A

Date

08/03/2014

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

Contributor address; City; State; Zip Code
7205 Daugherty St
Austin, TX 78757

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
N/A

Date

07/17/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Smith, David (Mr.)

Contributor address; City; State; Zip Code
P.O. Box 537
Austin, TX 78767

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/22/2014

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

Contributor address; City; State; Zip Code
1912 Ridgemont Dr
Austin, TX 78723

Amount of
contribution (\$)

\$175.00

In-kind contribution
description (if applicable)

(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: 49/58 Report: 51/89	
2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 09/15/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Mark (Mr.) 6 Contributor address; City; State; Zip Code 1 Northknoll Circle Longview, TX 75601	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) Engineer		10 Employer (See Instructions) DXP Enterprises	
Date 09/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Mark C (Mr.) Contributor address; City; State; Zip Code 7817 El Dorado Dr. Austin, TX 78737	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 08/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Patricia (Ms.) Contributor address; City; State; Zip Code 1010 Westland Ridge Dripping Springs, TX 78620	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 08/05/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Snyder, Suzanne (Ms.) Contributor address; City; State; Zip Code 4100 Jackson Ave. #205 Austin, TX 78731	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) Retired		Employer (See Instructions) N/A	
Date 09/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Soeur, Channy (Mr.) Contributor address; City; State; Zip Code 7908 Cameron Rd Austin, TX 78754	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) Engineer		Employer (See Instructions) CAS Consulting	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 50/58 Report: 52/89

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

08/26/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Spears, David (Mr.)

6 Contributor address; City; State; Zip Code
13600 Breton Ridge St Bldg 22A
Houston, TX 77070

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
GM of Contact Services

10 Employer (See Instructions)
Greater Houston Transportation

Date

09/03/2014

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 (\$)

\$175.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/27/2014

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

Contributor address; City; State; Zip Code
1114 Fieldcrest Dr.
Austin, TX 78704

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/06/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Stonewall Democrats of Austin PAC

Contributor address; City; State; Zip Code
P.O. Box 40898
Austin, TX 78704

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/17/2014

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

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

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 51/58 Report: 53/89

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

09/22/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Strayhorn, Eddie (Mr.)

6 Contributor address; City; State; Zip Code
2812 Buckeye Trail
Cedar Park, TX 78613

7 Amount of
contribution (\$)

\$100.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

07/01/2014

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

Contributor address; City; State; Zip Code
10801 Plumewood Dr,
Austin, TX 78750

Amount of
contribution (\$)

\$20.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/15/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Swaffar, Bob (Mr.)

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

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/22/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Team, Lin (Ms.)

Contributor address; City; State; Zip Code
600 Bellevue Place
Austin, TX 78705

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/26/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Texas Taxi PAC

Contributor address; City; State; Zip Code
919 Congress Ave. Suite 1500
Austin, TX 78701

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(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: 52/58 Report: 54/89	
2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 09/10/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Thomson, Phyllis (Ms.) 6 Contributor address; City; State; Zip Code 608 West Croslin St Austin, TX 78752	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 09/20/2014	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) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Policy Advisor		Employer (See Instructions) City of Austin	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tipps, Lisa (Ms.) Contributor address; City; State; Zip Code P.O. Box 300038 Austin, TX 78703	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 09/15/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Todd, Wendy (Ms.) Contributor address; City; State; Zip Code 709 East Monroe St 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 09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Torgimson, Carol (Ms.) Contributor address; City; State; Zip Code 6104 Maury's Trail Austin, TX 78730	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) 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 #

Schedule: 53/58 Report: 55/89

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

09/24/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Torgimson, Peter (Mr.)

6 Contributor address; City; State; Zip Code
6104 Maury's Trail
Austin, TX 78730

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
Retired

10 Employer (See Instructions)
N/A

Date

09/18/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Trejo, Deborah (Ms.)

Contributor address; City; State; Zip Code
1717 Briar St
Austin, TX 78704

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/09/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Trybus, Janis (Ms.)

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

Amount of
contribution (\$)

\$30.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/22/2014

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

Contributor address; City; State; Zip Code
2604 Geraghty Ave.
Austin, TX 78757

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Consultant

Employer (See Instructions)
Austin Energy

Date

09/22/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Varghese, Lesley (Ms.)

Contributor address; City; State; Zip Code
606 West Lynn St #10
Austin, TX 78703

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Executive Director & General Counsel

Employer (See Instructions)
Asian American Resource Center, Inc

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 54/58 Report: 56/89

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

09/22/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Volpe, Marzia (Ms.)

6 Contributor address; City; State; Zip Code
1912 Ridgemont Dr
Austin, TX 78723

7 Amount of
contribution (\$)

\$175.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

08/26/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Wages, David Warren (Mr.)

Contributor address; City; State; Zip Code
406 Wildbird Dr
Houston, TX 77373

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
General Manager

Employer (See Instructions)
Greater Houston Transportation

Date

09/09/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Walker, Forrest (Mr.)

Contributor address; City; State; Zip Code
4320 Scales St
Austin, TX 78723

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/31/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Wallenstein, Debbie (Ms.)

Contributor address; City; State; Zip Code
504 East 49th St
Austin, TX 78751

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/20/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Walton, Marsha (Ms.)

Contributor address; City; State; Zip Code
1701 Bouldin Ave
Austin, TX 78704

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Occupational Therapist

Employer (See Instructions)
Ageless Living

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 55/58 Report: 57/89

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

09/14/2014

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

6 Contributor address; City; State; Zip Code
800 West Lynn St.
Austin, TX 78703

7 Amount of
contribution (\$)

\$75.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

08/17/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Warneke, Bob (Mr.)

Contributor address; City; State; Zip Code
310 Le Grande
Austin, TX 78704

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/17/2014

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

Contributor address; City; State; Zip Code
310 Le Grande
Austin, TX 78704

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/15/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Warner, Phyllis (Ms.)

Contributor address; City; State; Zip Code
5701 Trailridge Dr
Austin, TX 78731

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/26/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Waugh, Gene (Ms.)

Contributor address; City; State; Zip Code
608 Harthan St
Austin, TX 78703

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 56/58 Report: 58/89	
2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 08/29/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Way, Heather (Ms.) 6 Contributor address; City; State; Zip Code 2108 Wright St Austin, TX 78704	7 Amount of contribution (\$) \$200.00	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/Lecturer		10 Employer (See Instructions) University of Texas	
Date 08/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Weed, Betty (Ms.) Contributor address; City; State; Zip Code 2218 Alta Vista Ave. 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 07/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Weeks, Joelyn (Ms.) Contributor address; City; State; Zip Code 6805 Moonmont Austin, TX 78745	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 08/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Werbner, Stuart (Mr.) Contributor address; City; State; Zip Code 2118 Glendale Place 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 09/25/2014	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 (\$) \$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: 57/58 Report: 59/89

2 FILER NAME Tovo, Kathrynne (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

09/25/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Wilcox, Cynthia (Ms.)

6 Contributor address; City; State; Zip Code
6705 West Highway 290
#502 Suite 234
Austin, TX 78735

7 Amount of
contribution (\$)

\$100.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

07/17/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Wilson, Herminia (Ms.)

Contributor address; City; State; Zip Code
4803 Avenue H
Austin, TX 78751

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/14/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Wilson, Herminia (Ms.)

Contributor address; City; State; Zip Code
4803 Avenue H
Austin, TX 78751

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/17/2014

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

Contributor address; City; State; Zip Code
4803 Avenue H
Austin, TX 78751

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/14/2014

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

Contributor address; City; State; Zip Code
4803 Avenue H
Austin, TX 78751

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

(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: 58/58 Report: 60/89

2 FILER NAME Tovo, Kathrynne (Ms.)**3 ACCOUNT #** (Ethics Commission filers)

00005000

4 Date

09/09/2014

5 Full name of contributor ☐ 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 (\$)**

\$50.00

**8 In-kind contribution
description (if applicable)**(If travel outside of Texas, complete Schedule T) ☐**9 Principal occupation / Job title (See Instructions)****10 Employer (See Instructions)****Date**

09/24/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Zent, Shelley (Ms.)**Contributor address; City; State; Zip Code**
5507 Lemonwood Dr.
Austin, TX 78731**Amount of
contribution (\$)**

\$20.00

**In-kind contribution
description (if applicable)**(If travel outside of Texas, complete Schedule T) ☐**Principal occupation / Job title (See Instructions)****Employer (See Instructions)**

LOANS**SCHEDULE E**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 1/1 Report: 61/89

2 FILER NAME Tovo, Kathrynne (Ms.)**3** ACCOUNT # (Ethics Commission filers)

00005000

4

TOTAL OF UNITEMIZED LOANS:

⇒⇒⇒⇒⇒⇒

\$

5 Date of loan
09/23/2014**7** Name of lender ☐ out-of-state PAC (ID# _____)
Tovo, Kathrynne (Ms.)**9** Loan Amount (\$)
\$40,000.00**6** Is lender a
financial institution?

No**8** Lender address; City; State; Zip Code
809 W 32nd Street
Austin, TX 78705**10** Interest rate
N/A**11** Maturity date**12** Principal occupation / Job title (See Instructions)
City Council**13** Employer (See Instructions)
City of Austin**14** Description of Collateral
☒ none**15** Check if personal funds were deposited into political account
☒**16** GUARANTOR
INFORMATION**17** Name of guarantor**19** Amount Guaranteed (\$)☒ not applicable**18** Guarantor address; City; State; Zip Code**20** Principal Occupation**21** Employer

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: 1/27 Report: 62/89		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000
4 Date 09/01/2014	5 Payee name AFL-CIO			
6 Amount (\$) \$145.00	7 Payee address City; State; Zip Code 1106 Lavaca St #200 Austin, TX 78701			
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 Advertising <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 09/01/2014	Payee name AFL-CIO			
Amount (\$) \$20.00	Payee address City; State; Zip Code 1106 Lavaca St #200 Austin, TX 78701			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event Tickets <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 07/15/2014	Payee name AT&T			
Amount (\$) \$56.73	Payee address City; State; Zip Code 5700 Burnet Road 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 internet services <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 08/25/2014	Payee name AT&T			
Amount (\$) \$54.98	Payee address City; State; Zip Code 5700 Burnet Road 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 internet services <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
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: 2/27 Report: 63/89		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000
4 Date 07/17/2014	5 Payee name Athenian Bar and Grill			
6 Amount (\$) \$251.14	7 Payee address City: State: Zip Code 600 Congress Ste C150 Austin, TX 78701			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Food for grand opening	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 08/22/2014	Payee name Austin's Pizza			
Amount (\$) \$162.40	Payee address City: State: Zip Code 1600 W 35th St Austin, TX 78703			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Food for event	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 08/01/2014	Payee name Bouldin Creek Neighborhood Association			
Amount (\$) \$168.00	Payee address City: State: Zip Code 904 Ebony St Austin, TX 78704			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political advertising	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 08/22/2014	Payee name Breed & Co., Inc.			
Amount (\$) \$17.24	Payee address City: State: Zip Code 718 West 29th Street Austin, TX 78705			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Art supplies for event	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
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: 3/27 Report: 64/89		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000
4 Date 07/01/2014	5 Payee name Butts, David (Mr.)			
6 Amount (\$) \$800.00	7 Payee address City; State; Zip Code 1914 Patton Ln Austin, TX 78723			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political Consulting	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:			
Date 08/01/2014	Payee name Butts, David (Mr.)			
Amount (\$) \$800.00	Payee address City; State; Zip Code 1914 Patton Ln Austin, TX 78723			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political consulting	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:			
Date 09/01/2014	Payee name Butts, David (Mr.)			
Amount (\$) \$800.00	Payee address City; State; Zip Code 1914 Patton Ln Austin, TX 78723			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political consulting	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:			
Date 07/10/2014	Payee name Capitol Courier			
Amount (\$) \$43.50	Payee address City; State; Zip Code P.O. Box 3182 Austin, TX 78764			
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"/> Courier Services	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
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: 4/27 Report: 65/89		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000
4 Date 09/13/2014	5 Payee name Capitol Courier			
6 Amount (\$) \$11.75	7 Payee address City; State; Zip Code P.O. Box 3182 Austin, TX 78764			
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"/> Courier services	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 08/27/2014	Payee name Chambliss, Paul (Mr.)			
Amount (\$) \$1,125.00	Payee address City; State; Zip Code 16900 Fagerquist Rd. Del Valle, TX 78617			
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 campaign services	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 09/12/2014	Payee name Chambliss, Paul (Mr.)			
Amount (\$) \$945.00	Payee address City; State; Zip Code 16900 Fagerquist Rd. Del Valle, TX 78617			
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 campaign services	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 09/18/2014	Payee name CheckMark Typesetting			
Amount (\$) \$73.61	Payee address City; State; Zip Code 3217 N. IH 35 Austin, TX 78722			
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 - badges	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
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: 5/27 Report: 66/89		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000
4 Date 07/30/2014	5 Payee name Cherrywood Neighborhood Association			
6 Amount (\$) \$100.00	7 Payee address City: State: Zip Code P.O. Box 4631 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 Advertising <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:			
Date 07/17/2014	Payee name Conans Pizza			
Amount (\$) \$171.85	Payee address City: State: Zip Code 603 W 29th St Austin, TX 78705			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Food for grand opening <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:			
Date 07/15/2014	Payee name Cricket Wireless			
Amount (\$) \$25.00	Payee address City: State: Zip Code 8617 Research Blvd Ste 220 Austin, TX 78758			
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"/> Phone services <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:			
Date 08/19/2014	Payee name Cricket Wireless			
Amount (\$) \$43.33	Payee address City: State: Zip Code 8617 Research Blvd Ste 220 Austin, TX 78758			
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"/> Phone services <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
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: 6/27 Report: 67/89		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000
4 Date 09/17/2014	5 Payee name Cricket Wireless			
6 Amount (\$) \$50.00	7 Payee address City: State: Zip Code 8617 Research Blvd Ste 220 Austin, TX 78758			
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"/> Phone services <input type="checkbox"/> Check If Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 08/15/2014	Payee name Dahl-Stamnes, Erika (Ms.)			
Amount (\$) \$187.00	Payee address City: State: Zip Code 10900 Research Blvd #1600 Austin, TX 78759			
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 campaign services <input type="checkbox"/> Check If Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 09/01/2014	Payee name Dahl-Stamnes, Erika (Ms.)			
Amount (\$) \$209.00	Payee address City: State: Zip Code 10900 Research Blvd #1600 Austin, TX 78759			
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 campaign services <input type="checkbox"/> Check If Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 09/15/2014	Payee name Dahl-Stamnes, Erika (Ms.)			
Amount (\$) \$242.00	Payee address City: State: Zip Code 10900 Research Blvd #1600 Austin, TX 78759			
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 campaign services <input type="checkbox"/> Check If Austin, TX, officeholder living expense	
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: 7/27 Report: 68/89		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000
4 Date 07/18/2014	5 Payee name David Thomas Photography			
6 Amount (\$) \$200.00	7 Payee address City: State; Zip Code 2004 B East 9th Street Austin, TX 78702			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Photography services at opening event	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 07/01/2014	Payee name De Los Santos, Drew (Ms.)			
Amount (\$) \$1,250.00	Payee address City: State; Zip Code 2601 Parker Ln Unit A Austin, TX 78701			
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 for Campaign Services	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 07/15/2014	Payee name De Los Santos, Drew (Ms.)			
Amount (\$) \$1,250.00	Payee address City: State; Zip Code 2601 Parker Ln Unit A Austin, TX 78701			
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 for Campaign Services	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 08/01/2014	Payee name De Los Santos, Drew (Ms.)			
Amount (\$) \$1,250.00	Payee address City: State; Zip Code 2601 Parker Ln Unit A Austin, TX 78701			
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 for campaign services	
	<input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense			
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: 8/27 Report: 69/89		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000
4 Date 08/15/2014	5 Payee name De Los Santos, Drew (Ms.)			
6 Amount (\$) \$1,250.00	7 Payee address City: State: Zip Code 2601 Parker Ln Unit A Austin, TX 78701			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary for campaign services	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 09/01/2014	Payee name De Los Santos, Drew (Ms.)			
Amount (\$) \$1,250.00	Payee address City: State: Zip Code 2601 Parker Ln Unit A Austin, TX 78701			
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 for campaign services	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 09/15/2014	Payee name De Los Santos, Drew (Ms.)			
Amount (\$) \$1,250.00	Payee address City: State: Zip Code 2601 Parker Ln Unit A Austin, TX 78701			
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 for campaign services	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 09/17/2014	Payee name De Los Santos, Drew (Ms.)			
Amount (\$) \$200.00	Payee address City: State: Zip Code 2601 Parker Ln Unit A Austin, TX 78701			
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 for campaign services	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
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: 9/27 Report: 70/89		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000
4 Date 07/30/2014	5 Payee name DeMayo Cellular			
6 Amount (\$) \$82.46	7 Payee address City: State: Zip Code 8617 Research Blvd Ste 220 Austin, TX 78758			
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"/> Phone services	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:			
Date 07/15/2014	Payee name Dynamic Reprographics			
Amount (\$) \$41.63	Payee address City: State: Zip Code 817 W 12th St Austin, TX 78701			
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"/> Copy services	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:			
Date 07/31/2014	Payee name Dynamic Reprographics			
Amount (\$) \$5.60	Payee address City: State: Zip Code 817 W 12th St Austin, TX 78701			
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"/> Copy services	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:			
Date 07/31/2014	Payee name Facebook, Inc.			
Amount (\$) \$10.00	Payee address City: State: Zip Code 1601 Willow Road Menlo Park, CA 94025			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political advertising	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
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: 10/27 Report: 71/89		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000
4 Date 08/31/2014	5 Payee name Facebook, Inc.			
6 Amount (\$) \$15.62	7 Payee address City; State; Zip Code 1601 Willow Road. Menlo Park, CA 94025			
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 advertising	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 09/12/2014	Payee name Fagan, Dennis (Mr.)			
Amount (\$) \$59.40	Payee address City; State; Zip Code 1601 West 38th Street #202 Austin, TX 78731			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Photography services	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 07/17/2014	Payee name FedEx Office			
Amount (\$) \$40.03	Payee address City; State; Zip Code 6406 I-35 N Austin, TX 78752			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Supplies for grand opening	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 07/01/2014	Payee name Griffith Descendants, LLC			
Amount (\$) \$2,780.00	Payee address City; State; Zip Code 3536 Bee Caves Rd #310 Austin, TX 78746			
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	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
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: 11/27 Report: 72/89		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000	
4 Date 08/01/2014		5 Payee name Griffith Descendants, LLC			
6 Amount (\$) \$2,780.00		7 Payee address City: State: Zip Code 3536 Bee Caves Rd #310 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 rent <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/01/2014		Payee name Griffith Descendants, LLC			
Amount (\$) \$2,780.00		Payee address City: State: Zip Code 3536 Bee Caves Rd #310 Austin, TX 78746			
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 <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 08/15/2014		Payee name Harland Clarke Corporation			
Amount (\$) \$25.03		Payee address City: State: Zip Code 10931 Laureate Drive Austin, TX 78249			
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"/> Campaign check fees <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/15/2014		Payee name Haule, Margaret (Ms.)			
Amount (\$) \$220.00		Payee address City: State: Zip Code 3405 Texas Topaz Dr. Austin, TX 78728			
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 campaign services <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
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: 12/27 Report: 73/89		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000	
4 Date 07/17/2014	5 Payee name HEB				
6 Amount (\$) \$12.36	7 Payee address City: State: Zip Code 1000 E. 41st Street Austin, TX 78751				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Drinks for grand opening <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 08/19/2014	Payee name HEB				
Amount (\$) \$11.37	Payee address City: State: Zip Code 2400 S. Congress Ave. Austin, TX 78704				
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"/> Breakfast for block walkers <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 08/22/2014	Payee name HEB				
Amount (\$) \$113.27	Payee address City: State: Zip Code 1801 East 51st Street Austin, TX 78723				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Food and Beverages for event <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 08/22/2014	Payee name HEB Cafe Mueller				
Amount (\$) \$35.72	Payee address City: State: Zip Code 1801 East 51st Street Austin, TX 78723				
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"/> Lunch for campaign staff <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
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: 13/27 Report: 74/89		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000
4 Date 07/01/2014	5 Payee name Hughes, William (Mr.)			
6 Amount (\$) \$1,650.00	7 Payee address City: State: Zip Code 1009 Hillside Oaks Dr. Austin, TX 78745			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary for campaign services	
	<input type="checkbox"/> Check If Austin, TX, officeholder living expense			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:			
Date 07/15/2014	Payee name Hughes, William (Mr.)			
Amount (\$) \$1,650.00	Payee address City: State: Zip Code 1009 Hillside Oaks Dr. Austin, TX 78745			
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 for campaign services	
	<input type="checkbox"/> Check If Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:			
Date 08/01/2014	Payee name Hughes, William (Mr.)			
Amount (\$) \$1,650.00	Payee address City: State: Zip Code 1009 Hillside Oaks Dr. Austin, TX 78745			
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 for campaign services	
	<input type="checkbox"/> Check If Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:			
Date 08/15/2014	Payee name Hughes, William (Mr.)			
Amount (\$) \$1,650.00	Payee address City: State: Zip Code 1009 Hillside Oaks Dr. Austin, TX 78745			
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 for campaign services	
	<input type="checkbox"/> Check If Austin, TX, officeholder living expense			
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: 14/27 Report: 75/89		2 FILER NAME Tovo, Kathryn (Ms.)		3 ACCOUNT # (TEC filers) 00005000
4 Date 09/01/2014	5 Payee name Hughes, William (Mr.)			
6 Amount (\$) \$1,650.00	7 Payee address City: State: Zip Code 1009 Hillside Oaks Dr. Austin, TX 78745			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary for campaign services <input type="checkbox"/> Check If Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:			
Date 09/15/2014	Payee name Hughes, William (Mr.)			
Amount (\$) \$1,650.00	Payee address City: State: Zip Code 1009 Hillside Oaks Dr. Austin, TX 78745			
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 for campaign services <input type="checkbox"/> Check If Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:			
Date 07/15/2014	Payee name Idealist.org			
Amount (\$) \$25.00	Payee address City: State: Zip Code 302 Fifth Avenue, 11th Floor New York, NY 10001			
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"/> Student intern posting <input type="checkbox"/> Check If Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:			
Date 08/21/2014	Payee name InFocus Campaigns			
Amount (\$) \$29.04	Payee address City: State: Zip Code P.O. Box 10726 Fort Worth, TX 76114			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Automated calling <input type="checkbox"/> Check If Austin, TX, officeholder living expense	
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: 15/27 Report: 76/89		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000
4 Date 09/02/2014	5 Payee name InFocus Campaigns			
6 Amount (\$) \$34.92	7 Payee address City: State: Zip Code P.O. Box 10726 Fort Worth, TX 76114			
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"/> Automated Calling	
	<input type="checkbox"/> Check If Austin, TX, officeholder living expense			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:			
Date 07/14/2014	Payee name Kelly Graphics			
Amount (\$) \$5,918.22	Payee address City: State: Zip Code 1409 Quaker Ridge Austin, TX 78746			
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 yard signs	
	<input type="checkbox"/> Check If Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:			
Date 07/01/2014	Payee name Kiobassa, Jolene (Ms.)			
Amount (\$) \$1,250.00	Payee address City: State: Zip Code 3007 West Ave Austin, TX 78705			
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 for campaign services	
	<input type="checkbox"/> Check If Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:			
Date 07/15/2014	Payee name Kiobassa, Jolene (Ms.)			
Amount (\$) \$1,250.00	Payee address City: State: Zip Code 3007 West Ave Austin, TX 78705			
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 for campaign services	
	<input type="checkbox"/> Check If Austin, TX, officeholder living expense			
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: 16/27 Report: 77/89		2 FILER NAME Tovo, Kathryne (Ms.)		3 ACCOUNT # (TEC filers) 00005000	
4 Date 08/01/2014		5 Payee name Kiolbassa, Jolene (Ms.)			
6 Amount (\$) \$1,250.00		7 Payee address City; State; Zip Code 3007 West Ave Austin, TX 78705			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary for campaign services <input type="checkbox"/> Check If Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought: Office held:			
Date 08/15/2014		Payee name Kiolbassa, Jolene (Ms.)			
Amount (\$) \$1,250.00		Payee address City; State; Zip Code 3007 West Ave Austin, TX 78705			
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 for campaign services <input type="checkbox"/> Check If Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought: Office held:			
Date 09/01/2014		Payee name Kiolbassa, Jolene (Ms.)			
Amount (\$) \$1,250.00		Payee address City; State; Zip Code 3007 West Ave Austin, TX 78705			
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 for campaign services <input type="checkbox"/> Check If Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought: Office held:			
Date 09/15/2014		Payee name Kiolbassa, Jolene (Ms.)			
Amount (\$) \$1,250.00		Payee address City; State; Zip Code 3007 West Ave Austin, TX 78705			
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 for campaign services <input type="checkbox"/> Check If Austin, TX, officeholder living expense	
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: 17/27 Report: 78/89		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000
4 Date 07/26/2014	5 Payee name La Mexicana Bakery			
6 Amount (\$) \$24.36	7 Payee address City: State: Zip Code 1924 South 1st Austin, TX 78704			
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"/> Volunteer breakfast <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:			
Date 07/17/2014	Payee name Michaels			
Amount (\$) \$41.38	Payee address City: State: Zip Code 5601 Brodie Ln Ste 200 Austin, TX 78745			
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 <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:			
Date 08/21/2014	Payee name Miller Blueprint Company			
Amount (\$) \$6.75	Payee address City: State: Zip Code 501 West Sixth St Austin, TX 78701			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Art supplies <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:			
Date 08/15/2014	Payee name Minguell, Tomas (Mr.)			
Amount (\$) \$154.00	Payee address City: State: Zip Code 2614 Canterbury Austin, TX 78759			
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 campaign services <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
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: 18/27 Report: 79/89		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000
4 Date 09/01/2014	5 Payee name Minguell, Tomas (Mr.)			
6 Amount (\$) \$231.00	7 Payee address City: State: Zip Code 2614 Canterbury Austin, TX 78759			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor for campaign services <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:			
Date 09/15/2014	Payee name Minguell, Tomas (Mr.)			
Amount (\$) \$154.00	Payee address City: State: Zip Code 2614 Canterbury Austin, TX 78759			
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 campaign services <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:			
Date 07/25/2014	Payee name Net Victories			
Amount (\$) \$58.80	Payee address City: State: Zip Code 4203 Montrose Blvd Suite 350 Houston, TX 77006			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Email services <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:			
Date 08/15/2014	Payee name Net Victories			
Amount (\$) \$200.00	Payee address City: State: Zip Code 4203 Montrose Blvd Suite 350 Houston, TX 77006			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Email Services <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
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: 19/27 Report: 80/89		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000
4 Date 08/25/2014	5 Payee name Net Victories			
6 Amount (\$) \$58.80	7 Payee address City; State; Zip Code 4203 Montrose Blvd Suite 350 Houston, TX 77006			
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"/> Email services	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 09/24/2014	Payee name Net Victories			
Amount (\$) \$58.80	Payee address City; State; Zip Code 4203 Montrose Blvd Suite 350 Houston, TX 77006			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Email Services	
	<input type="checkbox"/> Check If Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 09/05/2014	Payee name North University Neighborhood Association			
Amount (\$) \$50.00	Payee address City; State; Zip Code 502 West 33rd Street Austin, TX 78705			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political Advertising	
	<input type="checkbox"/> Check If Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 07/17/2014	Payee name Office Max			
Amount (\$) \$43.92	Payee address City; State; Zip Code 4615 North Lamar Blvd 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 - name tags, paper	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
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: 20/27 Report: 81/89		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000
4 Date 07/23/2014	5 Payee name Office Max			
6 Amount (\$) \$106.05	7 Payee address City: State: Zip Code 4615 North Lamar Blvd Austin, TX 78756			
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 supplies - toner, stickers, paper	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:			
Date 08/22/2014	Payee name Office Max			
Amount (\$) \$32.43	Payee address City: State: Zip Code 4615 North Lamar Blvd Austin, TX 78756			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Art supplies for event	
	<input type="checkbox"/> Check If Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:			
Date 08/27/2014	Payee name Office Max			
Amount (\$) \$4.11	Payee address City: State: Zip Code 4615 North Lamar Blvd 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"/> Office supplies - stickers	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:			
Date 08/08/2014	Payee name Opinion Analysts, Inc			
Amount (\$) \$11,500.00	Payee address City: State: Zip Code 906 Rio Grande St Austin, TX 78701			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Polling Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Polling	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
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: 21/27 Report: 82/89		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000	
4 Date 09/25/2014	5 Payee name Piryx, Inc.				
6 Amount (\$) \$2,333.43	7 Payee address City: State: Zip Code 144 2nd St. 1st floor San Francisco, CA 94105				
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"/> Cumulative donation processing fees for reporting period		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 08/15/2014	Payee name Ratliff, Gay (Ms.)				
Amount (\$) \$350.00	Payee address City: State: Zip Code 3509 Hampton Rd Austin, TX 78705				
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"/> Donation Refund		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 07/15/2014	Payee name Rindy & Associates, Inc.				
Amount (\$) \$300.00	Payee address City: State: Zip Code 2401 East 6th Street #1003 Austin, TX 78702				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political Advertising		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 09/11/2014	Payee name Rindy & Associates, Inc.				
Amount (\$) \$2,048.94	Payee address City: State: Zip Code 2401 East 6th Street #1003 Austin, TX 78702				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political Advertising		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
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: 22/27 Report: 83/89		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000	
4 Date 09/13/2014	5 Payee name Rindy & Associates, Inc.				
6 Amount (\$) \$9,300.00	7 Payee address City: State: Zip Code 2401 East 6th Street #1003 Austin, TX 78702				
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 Advertising		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 08/11/2014	Payee name Salvation Pizza				
Amount (\$) \$61.67	Payee address City: State: Zip Code 624 W 34th St Austin, TX 78705				
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"/> Dinner for campaign staff		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 08/15/2014	Payee name SignOutfitters.com				
Amount (\$) \$93.61	Payee address City: State: Zip Code 4176 6th Street Wyandotte, MI 48192				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Signs and stands for event		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 08/30/2014	Payee name South Austin Democrats				
Amount (\$) \$100.00	Payee address City: State: Zip Code P.O. Box 152592 Austin, TX 78715				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event Sponsorship		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
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: 23/27 Report: 84/89		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000
4 Date 09/04/2014	5 Payee name Speedy Inks			
6 Amount (\$) \$25.58	7 Payee address City; State; Zip Code 3788 Heinemann St. Long Beach, CA 90808			
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 supplies - toner cartridges <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:			
Date 08/30/2014	Payee name Star Stop 74			
Amount (\$) \$3.99	Payee address City; State; Zip Code 2819 Guadalupe Austin, TX 78705			
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"/> Beverage for volunteers <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:			
Date 07/19/2014	Payee name Sweetish Hill Bakery			
Amount (\$) \$37.89	Payee address City; State; Zip Code 1120 W 6th Street Austin, TX 78703			
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"/> Breakfast for campaign volunteers <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:			
Date 08/16/2014	Payee name Taco Shack			
Amount (\$) \$23.25	Payee address City; State; Zip Code 2825 Guadalupe Austin, TX 78705			
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"/> Breakfast for campaign workers <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
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: 24/27 Report: 85/89		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000
4 Date 08/23/2014	5 Payee name Taco Shack			
6 Amount (\$) \$15.50	7 Payee address City: State: Zip Code 2825 Guadalupe Austin, TX 78705			
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"/> Breakfast for campaign workers	
	<input type="checkbox"/> Check If Austin, TX, officeholder living expense			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 08/30/2014	Payee name Taco Shack			
Amount (\$) \$11.63	Payee address City: State: Zip Code 2825 Guadalupe Austin, TX 78705			
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"/> Breakfast for campaign workers	
	<input type="checkbox"/> Check If Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 09/06/2014	Payee name Taco Shack			
Amount (\$) \$27.67	Payee address City: State: Zip Code 2825 Guadalupe Austin, TX 78705			
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"/> Breakfast for campaign workers	
	<input type="checkbox"/> Check If Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 09/20/2014	Payee name Taco Shack			
Amount (\$) \$22.44	Payee address City: State: Zip Code 2825 Guadalupe Austin, TX 78705			
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"/> Breakfast for campaign workers	
	<input type="checkbox"/> Check If Austin, TX, officeholder living expense			
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: 25/27 Report: 86/89		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000	
4 Date 07/10/2014		5 Payee name Texas Made Productions			
6 Amount (\$) \$100.00		7 Payee address City: State: Zip Code 3707 Manchaca #177 Austin, TX 78704			
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"/> Video Services <input type="checkbox"/> Check If Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 08/22/2014		Payee name The Maids			
Amount (\$) \$104.57		Payee address City: State: Zip Code 8514 Cameron Rd Austin, TX 78754			
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 cleaning services <input type="checkbox"/> Check If Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/15/2014		Payee name The Maids			
Amount (\$) \$89.95		Payee address City: State: Zip Code 8514 Cameron Rd Austin, TX 78754			
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 cleaning services <input type="checkbox"/> Check If Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 08/01/2014		Payee name Tops			
Amount (\$) \$151.55		Payee address City: State: Zip Code 1300 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 <input type="checkbox"/> Check If Austin, TX, officeholder living expense	
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: 26/27 Report: 87/89		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000
4 Date 09/19/2014	5 Payee name United States Postal Service - Central Park Station			
6 Amount (\$) \$49.00	7 Payee address City; State; Zip Code 3507 North Lamar Blvd Austin, TX 78705			
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"/> Postage	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 07/17/2014	Payee name Van Haitsma, Susan (Ms.)			
Amount (\$) \$60.00	Payee address City; State; Zip Code 706 W 31st Austin, TX 78705			
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 campaign services	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 07/28/2014	Payee name Van Haitsma, Susan (Ms.)			
Amount (\$) \$30.00	Payee address City; State; Zip Code 706 W 31st Austin, TX 78705			
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 campaign services	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 08/01/2014	Payee name Van Haitsma, Susan (Ms.)			
Amount (\$) \$30.00	Payee address City; State; Zip Code 706 W 31st Austin, TX 78705			
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 campaign services	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
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: 27/27 Report: 88/89		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000
4 Date 08/13/2014	5 Payee name Van Haitsma, Susan (Ms.)			
6 Amount (\$) \$30.00	7 Payee address City: State: Zip Code 706 W 31st Austin, TX 78705			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor for campaign services	
	<input type="checkbox"/> Check If Austin, TX, officeholder living expense			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:			
Date 08/15/2014	Payee name Wells Fargo			
Amount (\$) \$5.00	Payee address City: State: Zip Code 501 S Congress Ave Austin, TX 78704			
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"/> Bank fee	
	<input type="checkbox"/> Check If Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:			
Date 08/22/2014	Payee name Worley Printing Co, Inc.			
Amount (\$) \$1,530.66	Payee address City: State: Zip Code 3217 North IH 35 Austin, TX 78722			
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 road signs, bumper stickers	
	<input type="checkbox"/> Check If Austin, TX, officeholder living expense			
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: 1/1 Report: 89/89		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000	
4 Date 08/15/2014		5 Payee name Capital Area Democratic Women			
6 Amount (\$) \$39.00 <input type="checkbox"/> Reimbursement from political contributions intended		7 Payee address City; State; Zip Code P.O. Box 12962 Austin, TX 78711			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event tickets <input type="checkbox"/> Check If Austin, TX, officeholder living expense	
Date 09/16/2014		Payee name Capital Area Democratic Women			
Amount (\$) \$154.00 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code P.O. Box 12962 Austin, TX 78711			
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"/> Membership Dues <input type="checkbox"/> Check If Austin, TX, officeholder living expense	
Date 09/17/2014		Payee name Capital Area Democratic Women			
Amount (\$) \$31.90 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code P.O. Box 12962 Austin, TX 78711			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event tickets <input type="checkbox"/> Check If Austin, TX, officeholder living expense	
Date 07/29/2014		Payee name Stonewall Democrats of Austin			
Amount (\$) \$30.00 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code P.O. Box 40898 Austin, TX 78704			
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"/> Membership Dues <input type="checkbox"/> Check If Austin, TX, officeholder living expense	

BUNDLING REPORT

Name of candidate/officeholder: Kathryn Tovo

1. For each person/bundler who has solicited and obtained campaign contributions on your behalf of \$200 or more per person from five (5) or more individuals during the reporting period, provide the following information. (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 Individual/Bundler	Address	Occupation	Employer	Total Amount Bundled
Joe Garcia	5906 Lookout Mountain Dr. Austin, TX 78731	Government & Public Affairs	The Garcia Group	\$4200

2. For each person identified above, enter the name and address of each individual contributor whose contribution was bundled by that individual. Attach additional sheets if necessary.

Name of Contributor	Address	Occupation	Employer	Contribution Amount	Bundler
Rick Barrett	16606 Sperry Gdns Dr Houston, TX 77095	President	Greater Houston Transportation	\$350	Joe Garcia
Steven Harter	8 Winston Woods Dr Houston, TX 77024	Chairman	Texas Taxi Inc.	\$350	Joe Garcia
Suzanne Harter	8 Winston Woods Dr Houston, TX 77024	Homemaker	None	\$350	Joe Garcia
Martyn Hill	6410 Oak Masters Dr Spring, TX 77379	Attorney	Pagel, David & Hill, P.C.	\$350	Joe Garcia
Jo Vanna Hill	6410 Oak Masters Dr Spring, TX 77379	Homemaker	None	\$350	Joe Garcia
Diana Martinez	510 E 7 th Houston, TX 77007	Homemaker	None	\$350	Joe Garcia
Roman Martinez	510 E 7 th Houston, TX 77007	President	Texas Taxi, Inc.	\$350	Joe Garcia
Sarah Murphy	13600 Breton Ridge St Bldg 22a Houston, TX 77070	Pharmaceutical Rep.	Teva	\$350	Joe Garcia
James Rodriguez	7515 Santa Fe Dr Houston, TX 77071	Vice President	Texas Taxi, Inc.	\$350	Joe Garcia
David Spears	13600 Breton Ridge St Bldg 22a Houston, TX 77070	GM of Contract Services	Greater Houston Transportation	\$350	Joe Garcia
David Warren Wages	406 Wild Bird Dr. Houston, TX 77373	General Manager	Greater Houston Transportation	\$350	Joe Garcia
Texas Taxi PAC	919 Congress Ave. STE 1500 Austin, TX 78701			\$350	Joe Garcia

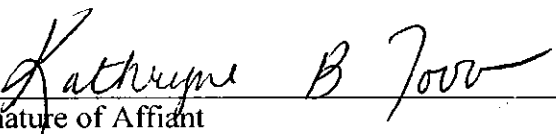
3. Identify each person registered or required to be register under City Code, Chapter 4-8 (Regulation of Lobbyists) employed by, or compensated to lobby by: (1) any Bundler identified in Section 1 above, (2) a business association through which the Bundler does business, or (3) the Bundler's employer.

None

Note: It is important to remember that contributions to you are from the actual donor, not from the individual who solicited the donations on your behalf. Therefore, on form C/OH you must identify the actual donor as the contributor.

**STATE OF TEXAS
VERIFICATION**

I certify that the total amount bundled on my behalf in the campaign period by all partners, shareholders, principals, employees, and persons who conduct business through a business association that is subject to City Code, Section 2-2-22(E), when added together, does not exceed ten (10) times the contribution limit set by City Charter, Article III, Section 8(A)(1) for the entire business association.



Signature of Affiant

PERSONAL FUNDS - LOANS AND EXPENDITURES

This report is for a candidate or officeholder who loans personal funds to his or her campaign or makes expenditures from personal funds in support of his or her campaign. The amounts loaned or expended shall be reported as follows.

Beginning on the date an individual becomes a candidate in a City election and continuing until midnight on the tenth day before a City election, a candidate shall report the new loans or expenditures cumulating to \$25,000 or more within seven business days after the total reaches \$25,000. Additional loans or expenditures cumulating \$25,000 or more shall be reported within seven business days each time the total reaches \$25,000. [City Code, Section 2-2-27(A)(1)]

If the loans or expenditures cumulating to \$25,000 or more occur during the period beginning on midnight on the 10th day before an election and ending at midnight on the day before the election, the report shall be filed with the City Clerk within twenty-four hours after the total reaches \$25,000. Additional loans or expenditures totaling \$25,000 or more shall be reported within twenty-four hours each time the total reaches \$25,000. [City Code, Section 2-2-27(A)(2)]

Name of candidate/officeholder: Kathryne Tovo

Reporting Period:

- ☒ First day of candidacy – Midnight on the 10th day prior to City election
☐ Midnight on the 10th day before City election – Midnight on the day before election

Enter the following information concerning loans of personal funds to the campaign:

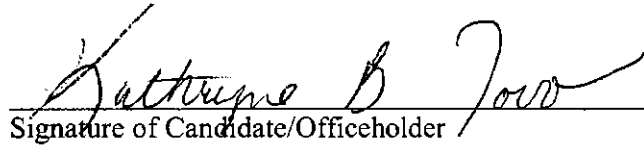
Amount of loan	Date of loan
\$40,000	9-25-14

Enter the following information concerning the person or persons to whom expenditures were made from personal funds and the total amount, purpose and date of each expenditure:

Name	Street Address	Amount	Purpose	Date

STATE OF TEXAS
VERIFICATION

I swear that the preceding disclosure of loans and expenditures from personal funds of a candidate or officeholder filed herewith is in all things true and correct and fully shows all information required to be reported by me pursuant to City Code, Section 2-2-27 for the reporting period indicated.



Signature of Candidate/Officeholder