

FORM C/OH
COVER SHEET PG 1

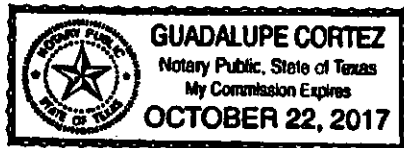
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AUSTIN CITY CLERK
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**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS****FORM C/OH
COVER SHEET PG 2**

| | | | |
|---|--|--|--|
| 13 C/OH NAME Daniel, Katrina (Ms.) | | 14 ACCOUNT # (Ethics Commission filers) 00000004 | |
| 15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> additional pages | .. 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 <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC | COMMITTEE NAME <hr/> | |
| | COMMITTEE ADDRESS <hr/> | | |
| | COMMITTEE CAMPAIGN TREASURER NAME <hr/> | | |
| | COMMITTEE CAMPAIGN TREASURER ADDRESS <hr/> | | |
| 16 CONTRIBUTION TOTALS | 1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED | \$ 0.00 | |
| EXPENDITURE TOTALS | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ 23,534.00 | |
| CONTRIBUTION BALANCE | 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED | \$ 0.00 | |
| OUTSTANDING LOAN TOTALS | 4. TOTAL POLITICAL EXPENDITURES | \$ 19,052.50 | |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 13,747.42 | |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 0.00 | |

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.



Katrina Daniel
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Katrina Daniel, this the 14th day of October, 20 14, to certify which, witness my hand and seal of office.

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: 1/28 Report: 3/43

2 FILER NAME Daniel, Katrina (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00000004

4 Date

09/24/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Alexander, Troy & Kara

6 Contributor address; City; State; Zip Code
1508 Braided Rope Dr
Austin, TX 78727

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)
Associate Director Advocacy

10 Employer (See Instructions)
Texas Medical Association

Date

09/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Apodaca, Michelle

Contributor address; City; State; Zip Code
PO Box 5972
Austin, TX 78763

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)
Lawyer

Employer (See Instructions)
Waller

Date

09/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ausley, Robbie

Contributor address; City; State; Zip Code
3707 Laurel Ledge Ln
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)
Retired

Employer (See Instructions)
Retired

Date

08/15/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Austin Police Association PAC

Contributor address; City; State; Zip Code
5817 Wilcab Road, Suite #4
Austin, TX 78721

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

09/04/2014

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

Contributor address; City; State; Zip Code
2501 Galewood Place
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)
Lawyer

Employer (See Instructions)
Texas Hospital Association

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 2/28 Report: 4/43

2 FILER NAME Daniel, Katrina (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00000004

4 Date

08/05/2014

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

Barker, Bobbie

6 Contributor address; City; State; Zip Code

300 Bowie Street #4004
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)
Vice President

10 Employer (See Instructions)
St Davids Foundation

Date

09/22/2014

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

Beck, E C

Contributor address; City; State; Zip Code

7716 Basil Dr
Austin, TX 78750

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)
Owner

Employer (See Instructions)
Beck and Company

Date

09/22/2014

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

Beck, E C

Contributor address; City; State; Zip Code

7716 Basil Dr
Austin, TX 78750

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)
Owner

Employer (See Instructions)
Beck and Company

Date

09/22/2014

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

Beck, E C

Contributor address; City; State; Zip Code

7716 Basil Dr
Austin, TX 78750

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)
Owner

Employer (See Instructions)
Beck and Company

Date

09/23/2014

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

Beinke, Allen

Contributor address; City; State; Zip Code

2607 Trail of the Madrones
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: 3/28 Report: 5/43

2 FILER NAME Daniel, Katrina (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00000004

4 Date

09/25/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Belcher, Nora

6 Contributor address; City; State; Zip Code
4709 Trail Crest Cir
Austin, TX 78735

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)
Trade Associate Executive

10 Employer (See Instructions)
Texas e-Health Alliance

Date

07/03/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Berlanga, Hugo

Contributor address; City; State; Zip Code
28 Hewitt Dr
Corpus Christi, TX 78404

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)
Govt Consultant

Employer (See Instructions)
Self

Date

09/24/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Bernard, Jim

Contributor address; City; State; Zip Code
7140 Chimney Cors
Austin, TX 78731

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)
Finance

Employer (See Instructions)
PSW Real Estate

Date

09/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Blanca, Laborde

Contributor address; City; State; Zip Code
2100 La Casa Drive
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)
Consultant

Employer (See Instructions)
Blanca Laborde

Date

09/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Bosse, Portia

Contributor address; City; State; Zip Code
9610 Southward Cove
Austin, TX 78733

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)
Attorney

Employer (See Instructions)
Texas State Teachers Association

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 4/28 Report: 6/43

2 FILER NAME Daniel, Katrina (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00000004

4 Date

09/06/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Brady, Denise

6 Contributor address; City; State; Zip Code
1310 San Antonio St #2
Austin, TX 78701

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

09/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Brass, Chelsea

Contributor address; City; State; Zip Code
8205 Brettonwoods Lane
Austin, TX 78753

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)
Campaign Manager

Employer (See Instructions)
Katrina; Daniel Campaign

Date

09/23/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Bresnen, Mr and Mrs Steve

Contributor address; City; State; Zip Code
1801 Lavaca, Suite 13L
Austin, TX 78701

Amount of
contribution (\$)

\$700.00

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

Date

08/06/2014

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

Contributor address; City; State; Zip Code
1413 Corona Dr
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)
Professor

Employer (See Instructions)
UT SPH

Date

08/21/2014

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

Contributor address; City; State; Zip Code
2603 Wooldridge
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)
Lobbyist

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: 5/28 Report: 7/43

2 FILER NAME Daniel, Katrina (Ms.)**3** ACCOUNT # (Ethics Commission filers)

00000004

4 Date

08/27/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Brunson, Howard (Mr.)**6** Contributor address; City; State; Zip Code
PO Box 29825
Austin, TX 78755**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)
retired**10** Employer (See Instructions)
retired

Date

09/24/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Bune, JohnContributor address; City; State; Zip Code
2121 Barton Hills Dr
Austin, TX 78704Amount of
contribution (\$)

\$300.00

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

Date

09/23/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Burklund, AdamContributor address; City; State; Zip Code
1200 Barton Hills Dr
Apt 249
Austin, TX 78704Amount 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

09/23/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Canseco, KimContributor address; City; State; Zip Code
PO Box 384
Del Rio, TX 78841Amount 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# _____)
Chammal, LorraineContributor address; City; State; Zip Code
4111 Circletree Loop
Austin, TX 78731Amount of
contribution (\$)

\$50.00

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 6/28 Report: 8/43

2 FILER NAME Daniel, Katrina (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00000004

4 Date

09/25/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Cheng, Karen

6 Contributor address; City; State; Zip Code
6513 Mitra Drive
Austin, TX 78739

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)
Government Affairs

10 Employer (See Instructions)
Centene

Date

07/29/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Cockerell, Carey

Contributor address; City; State; Zip Code
1213 Timber View Dr
Bedford, TX 76021

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)
Social Worker

Employer (See Instructions)
Retired

Date

09/10/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Coleman, Angelique

Contributor address; City; State; Zip Code
4364 Faculty Lane
Houston, TX 77004

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)
Housewife

Employer (See Instructions)
Not Employed

Date

09/10/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Coleman, Garnet

Contributor address; City; State; Zip Code
PO Box 88140
Houston, TX 77288

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

Date

08/16/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Crimmins, Patrick

Contributor address; City; State; Zip Code
9415 McNeal Dr.
Apt 1224
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)
Media Relations Manager

Employer (See Instructions)
State of Texas

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 7/28 Report: 9/43

2 FILER NAME Daniel, Katrina (Ms.)**3** ACCOUNT # (Ethics Commission filers)

00000004

4 Date

08/05/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Danzeiser, Doug**6** Contributor address; City; State; Zip Code
7717 Kiva Drive
Austin, TX 78749**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)
Attorney**10** Employer (See Instructions)
State of Texas

Date

07/01/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Dejernet, EricContributor address; City; State; Zip Code
2902 Bonnie Road
Austin, TX 78703Amount of
contribution (\$)

\$50.00

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

Date

09/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Delisi, ThomasContributor address; City; State; Zip Code
1704 Windsor Rd
Austin, TX 78701Amount of
contribution (\$)

\$200.00

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

Date

09/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Diepenbrock, J RyanContributor address; City; State; Zip Code
504 Sunny Lane
Austin, TX 78704Amount of
contribution (\$)

\$300.00

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

Date

07/01/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Driscoll, EvanContributor address; City; State; Zip Code
5500 Ave F
Austin, TX 78751Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
Farm ManagerEmployer (See Instructions)
Green Gate Farms

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 8/28 Report: 10/43

2 FILER NAME Daniel, Katrina (Ms.)**3** ACCOUNT # (Ethics Commission filers)

00000004

4 Date

09/03/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Driscoll, Evan**6** Contributor address; City; State; Zip Code
6807 Tulane Dr
Austin, TX 78723**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)
Farm Direct Projects Manager**10** Employer (See Instructions)
Sustainable Food Center

Date

09/23/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Einhorn, Amy & PeterContributor address; City; State; Zip Code
1205 Sahara Ave
Austin, TX 78745Amount 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# _____)
Farmer, Mr & Mrs GaryContributor address; City; State; Zip Code
309 Lake Cliff Trail
Austin, TX 78746Amount of
contribution (\$)

\$700.00

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

Date

09/23/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Floyd, JasonContributor address; City; State; Zip Code
2609 Wilson St
Austin, TX 78704Amount of
contribution (\$)

\$300.00

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

Date

07/03/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ford, VictoriaContributor address; City; State; Zip Code
1712 Morrow St
Austin, TX 78757Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
Govt ConsultantEmployer (See Instructions)
K & L Gates

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 9/28 Report: 11/43

2 FILER NAME Daniel, Katrina (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00000004

4 Date

09/19/2014

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

6 Contributor address; City; State; Zip Code
505 Bell Lane
Maple Glen, PA 19002

7 Amount of
contribution (\$)

\$250.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
Consultant

10 Employer (See Instructions)
Sentinel Solutions, LLC

Date

08/21/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Gadbois, Glenn

Contributor address; City; State; Zip Code
5616 Bull Creek Rd
Austin, TX 78756

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)
ED

Employer (See Instructions)
Moveability Austin

Date

09/20/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Gilbert, Don

Contributor address; City; State; Zip Code
401 West 15th Street Suite 870
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)
Consultant

Employer (See Instructions)
Self

Date

09/24/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Glenn, Noble

Contributor address; City; State; Zip Code
8600 Ranch Road 620 N Apt 335
Austin, TX 78726

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)
BG Staffing

Date

08/21/2014

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

Contributor address; City; State; Zip Code
2930 Oestrick Lane
Austin, TX 78733

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)
Retired

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 10/28 Report: 12/43

2 FILER NAME Daniel, Katrina (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00000004

4 Date

09/24/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Grant, Kathryn6 Contributor address; City; State; Zip Code
915 W. Johanna Street
Austin, TX 787047 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)
Consultant10 Employer (See Instructions)
Self Employed

Date

09/16/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Hackney, ClintContributor address; City; State; Zip Code
PO Box 163164
Austin, TX 78716Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
Government Relations and Public PolicyEmployer (See Instructions)
Self

Date

07/16/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Hadley, ElizabethContributor address; City; State; Zip Code
2118 Bandera Path
Round Rock, TX 78665Amount of
contribution (\$)

\$100.00

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

Date

08/07/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Haley, AnthonyContributor address; City; State; Zip Code
301 Congress Avenue Suite 1700
Austin, TX 78701Amount of
contribution (\$)

\$350.00

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

Date

07/04/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Hall, NancyContributor address; City; State; Zip Code
606 Amesbury
Austin, TX 78752Amount of
contribution (\$)

\$100.00

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 11/28 Report: 13/43

2 FILER NAME Daniel, Katrina (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00000004

4 Date

09/25/2014

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Hanna, Mr & Mrs Mark

6 Contributor address;

City; State; Zip Code

900 Congress STE 250
Austin, TX 787017 Amount of
contribution (\$)

\$700.00

8 In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐9 Principal occupation / Job title (See Instructions)
Attorney10 Employer (See Instructions)
Self

Date

08/03/2014

Full name of contributor

☐ out-of-state PAC (ID# _____)

Hare, Belinda

Contributor address;

City; State; Zip Code

8501 Shenandoah Dr
Austin, TX 78753Amount 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

07/27/2014

Full name of contributor

☐ out-of-state PAC (ID# _____)

Harger, Rachel

Contributor address;

City; State; Zip Code

4313 Avenue G
Austin, TX 78751Amount of
contribution (\$)

\$25.00

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

Date

09/23/2014

Full name of contributor

☐ out-of-state PAC (ID# _____)

Hart, Patricia

Contributor address;

City; State; Zip Code

1504 Hardouin Ave
Austin, TX 78703Amount of
contribution (\$)

\$50.00

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

Date

09/25/2014

Full name of contributor

☐ out-of-state PAC (ID# _____)

Hawkins, John

Contributor address;

City; State; Zip Code

3222 Cherry Lane
Austin, TX 78703Amount of
contribution (\$)

\$350.00

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 12/28 Report: 14/43

2 FILER NAME Daniel, Katrina (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00000004

4 Date

09/25/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Hawkins, Mr & Mrs Albert

6 Contributor address; City; State; Zip Code
7005 Quill Leaf Cove
Austin, TX 78750

7 Amount of
contribution (\$)

\$700.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
Policy Consultant

10 Employer (See Instructions)
Self Employed

Date

07/03/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Heckmann, Kris

Contributor address; City; State; Zip Code
4305 Endcliffe
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)
Attorney

Employer (See Instructions)
Granite Public Affairs

Date

09/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Herzog, Amy

Contributor address; City; State; Zip Code
7212 Mitra Dr
Austin, TX 78739

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)
Policy Advisor

Employer (See Instructions)
State of Texas

Date

08/07/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Hickle, Randall

Contributor address; City; State; Zip Code
2404 Topeka
Lubbock, TX 79047

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)
Grace Medical

Date

09/17/2014

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

Contributor address; City; State; Zip Code
3121 Buffalo Speedway
Houston, TX 77098

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)
Healthcare Consultant

Employer (See Instructions)
GIS

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 13/28 Report: 15/43

2 FILER NAME Daniel, Katrina (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00000004

4 Date

09/05/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Hopson, Steve

6 Contributor address; City; State; Zip Code
1114 Hollybluff
Austin, TX 78753

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)
Retired

10 Employer (See Instructions)
Retired

Date

07/28/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Johns, Patty

Contributor address; City; State; Zip Code
1306 Cullen Ave
Austin, TX 78757

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)
Real Estate Broker

Employer (See Instructions)
Austin Portfolio Real Estate - KW

Date

09/25/2014

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

Contributor address; City; State; Zip Code
4703 Gold Flower Hollow
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)
Consultant

Employer (See Instructions)
Self

Date

09/25/2014

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

Contributor address; City; State; Zip Code
1308 Clifton Street NW Apt 412
Washington, DC 20009

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)
Lawyer

Employer (See Instructions)
Self

Date

07/03/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Katz, Hal

Contributor address; City; State; Zip Code
2301 S. 5th Unit 9
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)
Attorney

Employer (See Instructions)
Hursch Blackwell

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 14/28 Report: 16/43

2 FILER NAME Daniel, Katrina (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00000004

4 Date

09/23/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Kolodzey, Patricia

6 Contributor address; City; State; Zip Code
400 Gaines Court
Austin, TX 78735

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)
Lobbyist

10 Employer (See Instructions)
Texas Medical Association

Date

07/28/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Lambrew, Jeanne

Contributor address; City; State; Zip Code
2801 Connecticut Ave NW Apt 23
Washington, DC 20008

Amount of
contribution (\$)

\$199.00

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# _____)
Lavigne, Mike

Contributor address; City; State; Zip Code
1514 Richcreek Road
Austin, TX 78757

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)
PR

Employer (See Instructions)
Mike Lavigne Public Relations

Date

07/28/2014

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

Contributor address; City; State; Zip Code
3613 Wilson 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)
CPA

Employer (See Instructions)
Carpenter & Langford

Date

09/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Leonard, Eric

Contributor address; City; State; Zip Code
160 Drifting Sands Dr
Dripping Springs, TX 78620

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: 15/28 Report: 17/43

2 FILER NAME Daniel, Katrina (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00000004

4 Date

08/22/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Lieberknecht, John & Terry

6 Contributor address; City; State; Zip Code
1602 Patterson Rd
Austin, TX 78733

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)
Retired

10 Employer (See Instructions)
Retired

Date

09/24/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Lieberknecht, Katherine

Contributor address; City; State; Zip Code
3817 Avenue G
Austin, TX 78751

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)
Lecturer, PI

Employer (See Instructions)
UT Austin

Date

09/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Longley, Dianne

Contributor address; City; State; Zip Code
1507 Bamfield Cove
Round Rock, TX 78665

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)
Principal - Consulting

Employer (See Instructions)
Health Management Assoc

Date

09/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Longley, Joey

Contributor address; City; State; Zip Code
1507 Bamfield Cove
Round Rock, TX 78665

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)
Grant Thornton

Date

09/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mahoney, Brooke

Contributor address; City; State; Zip Code
19710 Spotted Owl Ln
Pflugerville, TX 78660

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: 16/28 Report: 18/43

2 FILER NAME Daniel, Katrina (Ms.)**3** ACCOUNT # (Ethics Commission filers)

00000004

4 Date

09/25/2014

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

Manross, Lee

6 Contributor address; City; State; Zip Code206 E. 15th #1
Austin, TX 78701**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)
Consultant**10** Employer (See Instructions)
Self

Date

09/22/2014

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

Marvitz, Darlene

Contributor address; City; State; Zip Code

PO Box 50550
Austin, TX 78763Amount of
contribution (\$)

\$100.00

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

Date

07/30/2014

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

Mathews, Miles

Contributor address; City; State; Zip Code

1326 Drifting Wind Run
Dripping Springs, TX 78620Amount of
contribution (\$)

\$250.00

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

Date

09/25/2014

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

Mayberry, Warren & Margaret

Contributor address; City; State; Zip Code

6917 Larue Belle Cove
Austin, TX 78739Amount of
contribution (\$)

\$200.00

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

Date

09/23/2014

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

Meredith, Lynn

Contributor address; City; State; Zip Code

98 San Jacinto Blvd
FSR-PH
Austin, TX 78701Amount of
contribution (\$)

\$100.00

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 17/28 Report: 19/43

2 FILER NAME Daniel, Katrina (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00000004

4 Date

09/22/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Meroney, Shannon

6 Contributor address; City; State; Zip Code
6901 Glen Ridge Drive
Austin, TX 78731

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)
Account Executive

10 Employer (See Instructions)
Aetna

Date

08/10/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Millwee, Billy

Contributor address; City; State; Zip Code
568 Beauchamp Road
Dripping Springs, TX 78620

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)
Consultant

Employer (See Instructions)
Self Employed

Date

09/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Moffatt, Lori

Contributor address; City; State; Zip Code
5903 Belfast Drive
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)
Editor

Employer (See Instructions)
TxDot

Date

07/01/2014

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

Contributor address; City; State; Zip Code
777 Taylor Street
Fort Worth, TX 76102

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)
Retired

Date

09/18/2014

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

Contributor address; City; State; Zip Code
4300 Rosedale Ave
Austin, TX 78756

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)
Executive Director

Employer (See Instructions)
Texas Impact

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 18/28 Report: 20/43

2 FILER NAME Daniel, Katrina (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00000004

4 Date

09/09/2014

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

Munoz, Mario

6 Contributor address; City; State; Zip Code

1731 Spyglass Dr. No 70
Austin, TX 78746

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)
Legislative Consultant

10 Employer (See Instructions)
Self

Date

09/24/2014

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

Needham, Terri

Contributor address; City; State; Zip Code

12521 Belcara Place
Austin, TX 78732

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)
Manager of Operations

Employer (See Instructions)
PS Landscape

Date

07/02/2014

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

Nicolas & Levinson, Sandra & Scott

Contributor address; City; State; Zip Code

TX

Amount of
contribution (\$)

\$500.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
State of Texas

Date

07/15/2014

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

Norton, Jo Betsy

Contributor address; City; State; Zip Code

611 Westbrook Dr
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)
Attorney

Employer (See Instructions)
Texas Mutual Ins. Co

Date

09/24/2014

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

Perrin, Sherry

Contributor address; City; State; Zip Code

8005 A Tuscarora Tr
Austin, TX 78729

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)
Regional Supervisor

Employer (See Instructions)
Jones Management Company

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

| | | | |
|---|---|--|--|
| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 19/28 Report: 21/43 | |
| 2 FILER NAME Daniel, Katrina (Ms.) | | 3 ACCOUNT # (Ethics Commission filers) 00000004 | |
| 4 Date 07/22/2014 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pickens, Marilyn 6 Contributor address; City; State; Zip Code 100 W Lisa Dr Austin, TX 78752 | 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) Teacher | | 10 Employer (See Instructions) Huntington-Surrey School | |
| Date 09/19/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pinnelli, Janis Contributor address; City; State; Zip Code PO Box Austin, TX 78763 | Amount of contribution (\$) \$350.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) Accountant | | Employer (See Instructions) Self | |
| Date 07/24/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pinon, Monica Contributor address; City; State; Zip Code 5930 Worth Street Dallas, TX 75214 | 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) Lawyer | | Employer (See Instructions) Health Care Service Corporation | |
| Date 07/27/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Polikov, Scott Contributor address; City; State; Zip Code 3000 Blackburn St Apt # Dallas, TX 78204 | 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) Town Planner | | Employer (See Instructions) Gateway Planning | |
| Date 09/20/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Quin, David Contributor address; City; State; Zip Code 1600 Pennsylvania Ave Austin, TX 78702 | 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) DSL Inc | | Employer (See Instructions) Program Manager | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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|---|--|--|--|
| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 20/28 Report: 22/43 | |
| 2 FILER NAME Daniel, Katrina (Ms.) | | 3 ACCOUNT # (Ethics Commission filers) 00000004 | |
| 4 Date 09/18/2014 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Quirk, Thomas 6 Contributor address; City; State; Zip Code 4307 Beechwood Lane Dallas, TX 75220 | 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) Health Care Services | | 10 Employer (See Instructions) United Health Care | |
| Date 09/24/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Randolph, Ian & Jane Contributor address; City; State; Zip Code 1309 Concho St. Austin, TX 78702 | 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) Lobbyist | | Employer (See Instructions) Premier Legislative Consulting | |
| Date 09/25/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rodriguez, Jim & Rita Contributor address; City; State; Zip Code 5117 Prairie Dunes Dr Austin, TX 78747 | 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) Healthcare Executive | | Employer (See Instructions) TexHealth Central Texas | |
| Date 09/20/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rodriguez, Marc Contributor address; City; State; Zip Code 485 Nicholas Lane Driftwood, TX 78619 | 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) Lobbyist | | Employer (See Instructions) Self Employed | |
| Date 09/25/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rogoff, Regina Contributor address; City; State; Zip Code 1705 Schieffer Austin, TX 78722 | Amount of contribution (\$) \$50.00 | In-kind contribution description (if applicable) |
| | | (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> | |
| Principal occupation / Job title (See Instructions) CEO | | Employer (See Instructions) Peoples Community Clinic | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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|--|--|---|--|
| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 21/28 Report: 23/43 | |
| 2 FILER NAME Daniel, Katrina (Ms.) | | 3 ACCOUNT # (Ethics Commission filers) 00000004 | |
| 4 Date 09/24/2014 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Roland, Bill 6 Contributor address; City; State; Zip Code 808 W 10th St Austin, TX 78701 | 7 Amount of contribution (\$) \$300.00 | 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) Principle | | 10 Employer (See Instructions) Granite Properties | |
| Date 09/25/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Romo, Joel Contributor address; City; State; Zip Code PO Box 114 Chappell Hill, TX 77426 | 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) Gov Relations | | Employer (See Instructions) Gov Relations | |
| Date 07/19/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sawyer, Charles Contributor address; City; State; Zip Code 6800 Airport Blvd Austin, TX 78752 | 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 09/23/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Schiless, Luniece Contributor address; City; State; Zip Code 1801 Yaupon Valley Rd Austin, TX 78746 | 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 07/23/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Schultz, Karla Contributor address; City; State; Zip Code 7005 Deborah Drive Austin, TX 78752 | 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) Attorney | | Employer (See Instructions) Walsh, Anderson, Gallegos, Green & Trevino, P.C. | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 22/28 Report: 24/43

2 FILER NAME Daniel, Katrina (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00000004

4 Date

09/25/2014

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

6 Contributor address; City; State; Zip Code
5904 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)
Attorney

10 Employer (See Instructions)
State

Date

09/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Simpson, Don

Contributor address; City; State; Zip Code
1105 Upland Dr
Austin, TX 78741

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)
Retired

Employer (See Instructions)
Retired

Date

09/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Spilman, Annie

Contributor address; City; State; Zip Code
10004 Sausalito Drive
Austin, TX 78759

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)
Lobbyist

Employer (See Instructions)
NFIB

Date

09/06/2014

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

Contributor address; City; State; Zip Code
PO 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

09/16/2014

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

Contributor address; City; State; Zip Code
4502 Riverwood Ct
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)
Lawyer

Employer (See Instructions)
Beatty Bangle Strama

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 23/28 Report: 25/43

2 FILER NAME Daniel, Katrina (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00000004

4 Date

09/25/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Strickland, Stanton

6 Contributor address; City; State; Zip Code
1174 San Bernard St
Austin, TX 78702

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

09/22/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Summerville, Patti

Contributor address; City; State; Zip Code
1820 West 10th Street
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)
Organizational Consultant

Employer (See Instructions)
Self Employed

Date

08/24/2014

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

Contributor address; City; State; Zip Code
3902 Silverspring Dr
Austin, TX 78759

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)
VP

Employer (See Instructions)
SUMA Social Marketing

Date

09/17/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Talerico, Jeanne

Contributor address; City; State; Zip Code
13404 Caballero Cv
Austin, TX 78727

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)
Association Director

Employer (See Instructions)
TALHFA

Date

07/06/2014

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

Contributor address; City; State; Zip Code
4611 Lambs Lane
Austin, TX 78744

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: 24/28 Report: 26/43

2 FILER NAME Daniel, Katrina (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00000004

4 Date

09/22/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Temborius, Karen

6 Contributor address; City; State; Zip Code
8601 Green Valley
Austin, TX 78759

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)
Property Management

10 Employer (See Instructions)
Westdale Real Estate

Date

08/05/2014

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

Contributor address; City; State; Zip Code
4818 E Ben White
Suite 104
Austin, TX 78741

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)
In Kind Contribution
Voter File Access

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

Principal occupation / Job title (See Instructions)
Comptroller

Employer (See Instructions)
Texas Democratic Party

Date

09/25/2014

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

Contributor address; City; State; Zip Code
100 W. O'Dell St
Austin, TX 78752

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)
retired - Refunded due to error on web

Employer (See Instructions)
retired

Date

09/25/2014

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

Contributor address; City; State; Zip Code
100 W. O'Dell St
Austin, TX 78752

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)
retired

Employer (See Instructions)
retired

Date

09/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Tredway, Ryan

Contributor address; City; State; Zip Code
335 Catalina Lane
Austin, TX 78737

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)
Attorney

Employer (See Instructions)
United Health

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 25/28 Report: 27/43

2 FILER NAME Daniel, Katrina (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00000004

4 Date

07/30/2014

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

Unruh, Stephen

6 Contributor address; City; State; Zip Code

2501 Aztec Drive
Austin, TX 78703

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)
Software Engineer

10 Employer (See Instructions)
ARL:UT

Date

09/18/2014

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

Van Sickle, S J

Contributor address; City; State; Zip Code

PO Box 301660
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)
Program Manager

Employer (See Instructions)
Applied Materials

Date

09/23/2014

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

Waldrop, Rebecca

Contributor address; City; State; Zip Code

4800 Placid Place
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)
Government Affairs

Employer (See Instructions)
Sandofi

Date

08/12/2014

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

Walker, Kwame

Contributor address; City; State; Zip Code

718 Sparks Avenue
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)
Lobbyist

Employer (See Instructions)
McGuire Woods Consulting LLC

Date

09/02/2014

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

Walker, Kwame

Contributor address; City; State; Zip Code

718 Sparks Avenue
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)
Lobbyist

Employer (See Instructions)*
McGuire Woods Consulting LLC

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

| | | | |
|---|---|--|--|
| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 26/28 Report: 28/43 | |
| 2 FILER NAME Daniel, Katrina (Ms.) | | 3 ACCOUNT # (Ethics Commission filers) 00000004 | |
| 4 Date 09/09/2014 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ward, Martha 6 Contributor address; City; State; Zip Code 905 East 55 1/2 Street 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) Retired | | 10 Employer (See Instructions) Retired | |
| Date 07/07/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) West, Jane Contributor address; City; State; Zip Code 9537 Big View Dr Austin, TX 78730 | 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) Finance Director | | Employer (See Instructions) Apple | |
| Date 09/25/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Whellus, C. Daniel Contributor address; City; State; Zip Code 3103 Bee Caves Rd Suite 201 Austin, TX 78746 | 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# _____) Whipple & Keltors, Lori & Jeff Contributor address; City; State; Zip Code 1602 Broadmoor Dr Austin, TX 78723 | Amount of contribution (\$) \$60.00 | 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 09/23/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Whitehurst, Darren Contributor address; City; State; Zip Code 4706 Chiappero Trail Austin, TX 78731 | Amount of contribution (\$) \$50.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) VP - Advocacy | | Employer (See Instructions) Medical Association | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

| | | | |
|---|--|--|--|
| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 27/28 Report: 29/43 | |
| 2 FILER NAME Daniel, Katrina (Ms.) | | 3 ACCOUNT # (Ethics Commission filers) 00000004 | |
| 4 Date 07/05/2014 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wing, Victoria 6 Contributor address; City; State; Zip Code 304 Wilmes Drive 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 07/01/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wissolik, Erica Contributor address; City; State; Zip Code 2001 L Street NW, Suite 700 Washington, DC 20036 | 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 09/25/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wissolik, Erica Contributor address; City; State; Zip Code 2001 L Street NW, Suite 700 Washington, DC 20036 | 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) Govt Relations | | Employer (See Instructions) IEEE | |
| Date 08/27/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wolfe, Leigh Contributor address; City; State; Zip Code 105 Timber Ridge Cv Austin, TX 78733 | 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) Clinical Social Worker/Psychotherapist | | Employer (See Instructions) Self Employed | |
| Date 09/24/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Woods Martin, Patsy Contributor address; City; State; Zip Code 3003 C West 35th Street 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) ED | | Employer (See Instructions) Annie's List | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 28/28 Report: 30/43

2 FILER NAME Daniel, Katrina (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00000004

4 Date

07/01/2014

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

Zabel, Doug

6 Contributor address; City; State; Zip Code
1501 Barton Springs Rd
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)
Retired

10 Employer (See Instructions)
Retired

Date

09/23/2014

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

Zachary, Andrew & Leslie

Contributor address; City; State; Zip Code
3220 Park Hills Dr
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)

LOANS**SCHEDULE E**

| | | | |
|--|---|---|----------------------------------|
| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 1/1 Report: 31/43 | |
| 2 FILER NAME Daniel, Katrina (Ms.) | | 3 ACCOUNT # (Ethics Commission filers) 00000004 | |
| 4 TOTAL OF UNITEMIZED LOANS: ⇄⇄⇄⇄⇄⇄ | | \$ 200.00 | |
| 5 Date of loan | 7 Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____) | 9 Loan Amount (\$) | |
| 6 Is lender a financial institution? | 8 Lender address; City; State; Zip Code | 10 Interest rate | |
| | | 11 Maturity date | |
| 12 Principal occupation / Job title (See Instructions) | | 13 Employer (See Instructions) | |
| 14 Description of Collateral <input type="checkbox"/> none | | 15 Check if personal funds were deposited into political account <input type="checkbox"/> | |
| 16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable | 17 Name of guarantor | | 19 Amount Guaranteed (\$) |
| | 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: 1/12 Report: 32/43 | | 2 FILER NAME Daniel, Katrina (Ms.) | | 3 ACCOUNT # (TEC filers) 00000004 | |
| 4 Date 08/22/2014 | 5 Payee name Adjavon, Tsoke | | | | |
| 6 Amount (\$) \$205.00 | 7 Payee address City: State: Zip Code 916 Rochester Castle Way Pflugerville, TX 78660 | | | | |
| 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"/> Booth at the Cultural Fest | | |
| | <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 Austin AFL- CIO | | | | |
| Amount (\$) \$145.00 | Payee address City: State: Zip Code C/O PO Box 301074 Austin, TX 78703 | | | | |
| 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"/> 2014 Labor Day Program Ad | | |
| | <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 Azul Strategies | | | | |
| Amount (\$) \$1,286.25 | Payee address City: State: Zip Code 1802 Ann Arbor 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"/> Tri-Folds 7500 | | |
| | <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 Azul Strategies | | | | |
| Amount (\$) \$1,320.00 | Payee address City: State: Zip Code 1802 Ann Arbor 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"/> Tri-Folds | | |
| | <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: 2/12 Report: 33/43

2 FILER NAME
Daniel, Katrina (Ms.)

3 ACCOUNT # (TEC filers)
00000004

4 Date
07/21/2014

5 Payee name
Azul Strategies

6 Amount (\$)
\$2,441.50

7 Payee address City: State: Zip Code
1802 Ann Arbor
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) ☐
Yard Signs, 4x8 signs, Tshirts

☐ 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
08/20/2014

Payee name
Azul Strategies

Amount (\$)
\$500.00

Payee address City: State: Zip Code
1802 Ann Arbor
Austin, TX 78704

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule)
Solicitation/Fundraising Expense

Description (If travel outside of Texas, complete Schedule T) ☐
Invoice # 14-04-04

☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name

Office sought: Office held:

Date
09/21/2014

Payee name
Azul Strategies

Amount (\$)
\$716.07

Payee address City: State: Zip Code
1802 Ann Arbor
Austin, TX 78704

PURPOSE OF EXPENDITURE

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

Description (If travel outside of Texas, complete Schedule T) ☐
Fundraising and event reimbursement

☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name

Office sought: Office held:

Date
09/23/2014

Payee name
Bob Bullock Museum

Amount (\$)
\$8.00

Payee address City: State: Zip Code
Austin, TX

PURPOSE OF EXPENDITURE

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

Description (If travel outside of Texas, complete Schedule T) ☐
Bob Bullock Texas State History Museum

☐ 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: 3/12 Report: 34/43 | | 2 FILER NAME Daniel, Katrina (Ms.) | | 3 ACCOUNT # (TEC filers) 00000004 | |
| 4 Date 07/15/2014 | | 5 Payee name Brass, Chelsea (Ms.) | | | |
| 6 Amount (\$) \$1,000.00 | | 7 Payee address City; State; Zip Code 8205 Brettonwoods Lane Austin, TX 78753 | | | |
| 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"/> payroll 7/1/2014 - 7/15/2014 <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 07/31/2014 | | Payee name Brass, Chelsea (Ms.) | | | |
| Amount (\$) \$1,000.00 | | Payee address City; State; Zip Code 8205 Brettonwoods Lane Austin, TX 78753 | | | |
| 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"/> Payroll 7/16/2014 - 7/31/2014 <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 08/20/2014 | | Payee name Brass, Chelsea (Ms.) | | | |
| Amount (\$) \$1,000.00 | | Payee address City; State; Zip Code 8205 Brettonwoods Lane Austin, TX 78753 | | | |
| 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"/> Payroll for Weeks of 8/1/14 - 8/15/14 <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 08/31/2014 | | Payee name Brass, Chelsea (Ms.) | | | |
| Amount (\$) \$1,000.00 | | Payee address City; State; Zip Code 8205 Brettonwoods Lane Austin, TX 78753 | | | |
| 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"/> Payroll for Weeks of 8/16/14 to 8/31/14 <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: 4/12 Report: 35/43 | | 2 FILER NAME Daniel, Katrina (Ms.) | | 3 ACCOUNT # (TEC filers) 00000004 | |
| 4 Date 09/15/2014 | 5 Payee name Brass, Chelsea (Ms.) | | | | |
| 6 Amount (\$) \$1,000.00 | 7 Payee address City: State: Zip Code 8205 Brettonwoods Lane Austin, TX 78753 | | | | |
| 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"/> Payroll for wks 9/1/2014 to 9/15/2014 | | |
| | <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 09/04/2014 | Payee name Clark, Elizabeth | | | | |
| Amount (\$) \$100.00 | Payee address City: State: Zip Code | | | | |
| 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"/> 10 hours of canvassing | | |
| | <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 09/23/2014 | Payee name Donor, Kate | | | | |
| Amount (\$) \$350.00 | Payee address City: State: Zip Code 815 Brazos St Austin, TX 78703 | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) OTHER - Return of contribution - By Cashier Check | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Return of contribution - By Cashier Check | | |
| | <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 08/31/2014 | Payee name Facebook | | | | |
| Amount (\$) \$70.58 | Payee address City: State: Zip Code | | | | |
| 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"/> Reimbursement for Facebook 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: |

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: 5/12 Report: 36/43 | | 2 FILER NAME Daniel, Katrina (Ms.) | | 3 ACCOUNT # (TEC filers) 00000004 | |
| 4 Date 08/20/2014 | 5 Payee name Kelly Graphics | | | | |
| 6 Amount (\$) \$1,118.47 | 7 Payee address City: State: Zip Code 1409 Quaker Ridge Austin, TX 78746 | | | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Letter Head, Envelopes, Lapel Stickers, Graphic Design | | |
| | <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 09/09/2014 | Payee name Martinez, Cristian | | | | |
| Amount (\$) \$180.00 | Payee address City: State: Zip Code 201 E. 21st # M0813R 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"/> Canvasser | | |
| | <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 09/21/2014 | Payee name Martinez, Cristian | | | | |
| Amount (\$) \$200.00 | Payee address City: State: Zip Code 201 E. 21st St #M0813R 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"/> Walking/canvassing | | |
| | <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 09/22/2014 | Payee name Northeast Station | | | | |
| Amount (\$) \$147.00 | Payee address City: State: Zip Code 900 Blackson Ave Austin, TX 78752 | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) OTHER - Post office for Stamps | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Stamps for mailings | | |
| | <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: 6/12 Report: 37/43 | | 2 FILER NAME Daniel, Katrina (Ms.) | | 3 ACCOUNT # (TEC filers) 00000004 | |
| 4 Date 08/03/2014 | | 5 Payee name Office Max | | | |
| 6 Amount (\$) \$13.62 | | 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) Advertising Expense | | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> OMX Copy Ream <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 09/09/2014 | | Payee name Olivares, Christopher | | | |
| Amount (\$) \$100.00 | | Payee address City: State: Zip Code 3715 Ticonderoga Dr San Antonio, TX 78230 | | | |
| 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"/> Canvansor <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 09/21/2014 | | Payee name Olivares, Christopher | | | |
| Amount (\$) \$200.00 | | Payee address City: State: Zip Code 3715 Ticonderoga Dr San Antonio, TX 78230 | | | |
| 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"/> Walking/canvassing <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 08/07/2014 | | Payee name Pacheco, Jeanette | | | |
| Amount (\$) \$320.00 | | Payee address City: State: Zip Code 4600 Elmont Dr Apt 933 B Austin, TX 78741 | | | |
| 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"/> Walker/doorhangers <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: 7/12 Report: 38/43 | | 2 FILER NAME Daniel, Katrina (Ms.) | | 3 ACCOUNT # (TEC filers) 00000004 | |
| 4 Date 08/17/2014 | | 5 Payee name Pacheco, Jeanette | | | |
| 6 Amount (\$) \$160.00 | | 7 Payee address City: State: Zip Code 4600 Elmont Dr Apt 933 B Austin, TX 78741 | | | |
| 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"/> Block Walking <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 08/05/2014 | | Payee name Post Office | | | |
| Amount (\$) \$588.00 | | Payee address City: State: Zip Code 900 Blackson Ave Austin, TX 78752 | | | |
| 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"/> Postage Stamps for mailout <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 Randalls | | | |
| Amount (\$) \$99.90 | | Payee address City: State: Zip Code 8040 Mesa Drive Austin, TX 78731 | | | |
| 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"/> Gift Cards to be used for gas for Canvassers <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 08/07/2014 | | Payee name Sills, Alejandro | | | |
| Amount (\$) \$280.00 | | Payee address City: State: Zip Code 10705 Buckthorn Drive 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"/> Walker/doorhangers <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: 8/12 Report: 39/43 | | 2 FILER NAME Daniel, Katrina (Ms.) | | 3 ACCOUNT # (TEC filers) 00000004 | |
| 4 Date 07/18/2014 | | 5 Payee name Staples | | | |
| 6 Amount (\$) \$19.43 | | 7 Payee address City: State: Zip Code 1201 Barbara Jordan Blvd Austin, TX 78723 | | | |
| 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"/> Water, staples <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 08/05/2014 | | Payee name Staples | | | |
| Amount (\$) \$48.68 | | Payee address City: State: Zip Code 1201 Barbara Jordan Blvd Austin, TX 78723 | | | |
| 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"/> Tape, Envelopes, Scissors <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 07/06/2014 | | Payee name Stoneking, Taryn (Ms.) | | | |
| Amount (\$) \$240.00 | | Payee address City: State: Zip Code 2208 Pearl St. #307 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"/> Payroll 6/30/2014 - 7/6/2014 <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 07/13/2014 | | Payee name Stoneking, Taryn (Ms.) | | | |
| Amount (\$) \$240.00 | | Payee address City: State: Zip Code 2208 Pearl St. #307 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"/> Payroll 7/7/2014 - 7/13/2014 <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: 9/12 Report: 40/43 | | 2 FILER NAME Daniel, Katrina (Ms.) | | 3 ACCOUNT # (TEC filers) 00000004 | |
| 4 Date 07/20/2014 | | 5 Payee name Stoneking, Taryn (Ms.) | | | |
| 6 Amount (\$) \$240.00 | | 7 Payee address City: State: Zip Code 2208 Pearl St. #307 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"/> Payroll 7/14/2014 - 7/20/2014 <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 07/27/2014 | | Payee name Stoneking, Taryn (Ms.) | | | |
| Amount (\$) \$240.00 | | Payee address City: State: Zip Code 2208 Pearl St. #307 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"/> Payroll 7/21/2014 - 7/27/14 <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 08/03/2014 | | Payee name Stoneking, Taryn (Ms.) | | | |
| Amount (\$) \$240.00 | | Payee address City: State: Zip Code 2208 Pearl St. #307 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"/> Payroll 7/28/2014 - 8/3/2014 <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 08/10/2014 | | Payee name Stoneking, Taryn (Ms.) | | | |
| Amount (\$) \$240.00 | | Payee address City: State: Zip Code 2208 Pearl St. #307 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"/> Payroll 8/4/2014 - 8/10/2014 <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: 10/12 Report: 41/43 | | 2 FILER NAME Daniel, Katrina (Ms.) | | 3 ACCOUNT # (TEC filers) 00000004 | |
| 4 Date 08/20/2014 | | 5 Payee name Stoneking, Taryn (Ms.) | | | |
| 6 Amount (\$) \$240.00 | | 7 Payee address City: State: Zip Code 2208 Pearl St. #307 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"/> Payroll Week of 8/11/14 - 8/17/14 <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 08/29/2014 | | Payee name Stoneking, Taryn (Ms.) | | | |
| Amount (\$) \$240.00 | | Payee address City: State: Zip Code 2208 Pearl St. #307 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"/> Payroll for Week of 8/18/14 to 8/24/14 <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 08/31/2014 | | Payee name Stoneking, Taryn (Ms.) | | | |
| Amount (\$) \$240.00 | | Payee address City: State: Zip Code 2208 Pearl St. #307 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"/> Payroll for Week of 8/25/14 to 8/31/14 <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 09/09/2014 | | Payee name Stoneking, Taryn (Ms.) | | | |
| Amount (\$) \$240.00 | | Payee address City: State: Zip Code 2208 Pearl St. #307 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"/> Payroll wk 9/1/2014 - 9/07/2014 <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: 11/12 Report: 42/43 | | 2 FILER NAME Daniel, Katrina (Ms.) | | 3 ACCOUNT # (TEC filers) 00000004 | |
| 4 Date 09/15/2014 | 5 Payee name Stoneking, Taryn (Ms.) | | | | |
| 6 Amount (\$) \$240.00 | 7 Payee address City: State: Zip Code 2208 Pearl St. #307 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"/> Payroll for wk 9/8/2014 - 9/14/2014 | | |
| | <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 09/21/2014 | Payee name Stoneking, Taryn (Ms.) | | | | |
| Amount (\$) \$240.00 | Payee address City: State: Zip Code 2208 Pearl St. #307 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"/> Payroll wk of 9/15/2014 - 9/21/2014 | | |
| | <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 Texas VAN Candidate | | | | |
| Amount (\$) \$225.00 | Payee address City: State: Zip Code 4818 Ben White Blvd STE 104 Austin, TX 78741 | | | | |
| 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"/> Contribution to the Texas Democratic Party for VAN | | |
| | <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 09/25/2014 | Payee name Traylor, Kitty | | | | |
| Amount (\$) \$150.00 | Payee address City: State: Zip Code 100 W O'Dell St Austin, TX 78752 | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) OTHER - Return of Contribution - Credit Card Web Bas | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Error in web based contribution - was not deposited as of this date | | |
| | <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
FeesGifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing ExpenseSalaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental ExpenseLoan 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: 12/12 Report: 43/43 | | 2 FILER NAME Daniel, Katrina (Ms.) | | 3 ACCOUNT # (TEC filers) 00000004 | |
| 4 Date 08/07/2014 | | 5 Payee name Washington, Randrick | | | |
| 6 Amount (\$) \$180.00 | | 7 Payee address City: State: Zip Code 12612 N. Lamar Apt 8105 Austin, TX 78753 | | | |
| 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"/> Walker/doorhangers <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: | | | |