

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1 Filer ID (Ethics Commission Filers) <u>0000500</u>		2 Total pages filed: <u>66</u>		OFFICE USE ONLY		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	Date Received		
	NICKNAME	LAST	SUFFIX			
4 ORIGINAL REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other (specify)	OCC RECEIVED AT 04/15/2018 4:58 Date Hand-delivered or Date Postmarked		
	<input checked="" type="checkbox"/> July 15	<input type="checkbox"/> Exceeded \$500 limit				
	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> 15th day after treasurer appointment (officeholder only)				
	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Final report				
5 ORIGINAL PERIOD COVERED	Month	Day	Year	Month	Day	Year
	01	01	2018	THROUGH	06	31
6 EXPLANATION OF CORRECTION To clarify purpose of expenditure to Y Strategy's on May 14, 2018.						

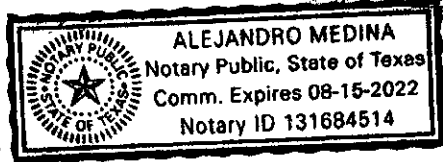
7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check ONLY if applicable:

☒ **Semiannual reports:** I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

☐ **Other reports:** I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.



AFFIX NOTARY STAMP / SEAL ABOVE

Kathryne B Tovo
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Kathryne Tovo, this the 9 day of October, 2018, to certify which, witness my hand and seal of office.

Alejandro Medina
Signature of officer administering oath

Alejandro Medina
Printed name of officer administering oath

Notary
Title of officer administering oath

**Remember To Attach Any Part Of The Campaign Finance Report Form
Needed To Report And Explain Corrections**

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

All Reports: A filer who files a corrected report must submit a correction affidavit. The affidavit must identify the information that has changed.

Reports filed with Texas Ethics Commission: A corrected report (other than a report due 8 days before an election or a special report near election) filed with the Ethics Commission after its due date is not considered late for purposes of late-filing penalties if: (1) any error or omission in the report as originally filed was made in good faith, and (2) the person filing the report files a corrected report and a good-faith affidavit not later than the 14th business day after the date the person learns that the report as originally filed is inaccurate or incomplete.

Semiannual Reports: Effective September 1, 2011, a semiannual report (due January 15 or July 15) that is amended/corrected before the eighth day after the original report was filed is considered to have been filed on the date the original report was filed. A semiannual report that is amended/corrected on or after the eighth day after the original report was filed is considered to have been filed on the date the original report was filed if: (1) the amendment/correction is made before any complaint is filed with regard to the subject of the amendment/correction; and (2) the original report was made in good faith and without intent to mislead or misrepresent the information contained in the report.

Attach additional pages as necessary.

INSTRUCTIONS FOR COMPLETING THIS FORM

The following numbers correspond to the numbered boxes on the other side.

- 1. Filer ID.** If you file with the Ethics Commission, you should have received a letter acknowledging receipt of your campaign treasurer appointment and assigning you a Filer ID. Put that number in this box. If you do not file with the Ethics Commission, skip this box.
- 2. Total Pages Filed.** After completing this form and any attachments, count the number of pages. Enter that number in this box. Each side of a two-sided form counts as a page. In other words, this form is two pages.
- 3. Candidate/Officeholder Name.** Put your full name here. Enter your name in the same way as on the report you are correcting.
- 4. Original Report Type.** Mark the type of report you are correcting.
- 5. Original Period Covered.** Enter the period covered by the report you are correcting. The year is important because filers sometimes correct reports years after filing the original.
- 6. Explanation of Correction.** Attach any part of the campaign finance report form needed to report and explain corrections. Explain why there was an error on the original report. Also explain what information is being corrected and how the new information is different from the information on the original report. (Use additional pages if you need more space.) You may also use this area to request a waiver or reduction of a late-filing penalty and state the basis of your request.
- 7. Affidavit.** Read the affidavit before signing. You must sign the affidavit in the presence of an individual authorized to take oaths. If signed before a notary public, the affidavit must include the notary's signature and seal.

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID		2 Total pages filed: 64	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST Kathryne		MI		OFFICE USE ONLY Date Received
	NICKNAME LAST Tovo		SUFFIX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 809 West 32nd Street Austin, TX 78705			ZIP CODE	
	Date Hand-delivered or Date Postmarked				
	Receipt #		Amount		
	Date Processed				
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST		MI		Date Imaged
	NICKNAME LAST		SUFFIX		
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE				
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION				
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)				
9 PERIOD COVERED	Month Day Year THROUGH Month Day Year 01/01/2018 06/30/2018				
10 ELECTION	ELECTION DATE Month Day Year 11/06/2018		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any) Austin City Council District 9		12 OFFICE SOUGHT (if known) Austin City Council District 9		

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

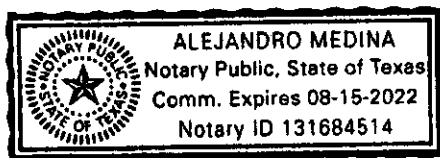
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13 C / OH NAME Tovo, Kathrynne	14 Filer ID
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	COMMITTEE TYPE	COMMITTEE NAME
	<input type="checkbox"/> GENERAL	
	<input type="checkbox"/> SPECIFIC	
		COMMITTEE ADDRESS
	COMMITTEE CAMPAIGN TREASURER NAME	
	COMMITTEE CAMPAIGN TREASURER ADDRESS	

16 CONTRIBUTION TOTALS	1.	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	65.00
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	41,591.00
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	0.00
	4.	TOTAL POLITICAL EXPENDITURES	\$	25,700.60
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	19,465.47
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	163,426.26

17 AFFIDAVIT



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

Kathrynne B Tovo
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Kathrynne Tovo, this the 9th day of October, 20 18, to certify which, witness my hand and seal of office.

Alejandro Medina
Signature of officer administering

Alejandro Medina
Printed name of officer administering

Notary
Title of officer administering oath

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3**

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18 FILER NAME Tovo, Kathrynne		19 Filer ID
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 41,591.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 0.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 23,506.22
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 330.83
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 1,863.55
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/42 Rpt: 4/64
2 FILER NAME Tovo, Kathryne		3 Filer ID
4 Date 03/15/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ahart, Rodney <hr/> 6 Contributor address; City; State; Zip Code 1609 Briarcliff Blvd Austin, TX 78723	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Executive Director		9 Employer (See Instructions) Keep Austin Beautiful
Date 02/08/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Chris <hr/> Contributor address; City; State; Zip Code 1406 W 39th 1/2 St Austin, TX 78756	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Self Employed
Date 04/07/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armbrust, Cheryl <hr/> Contributor address; City; State; Zip Code 100 Congress Ave Suite 1300 Austin, TX 78701	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) Self Employed
Date 04/07/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armbrust, David <hr/> Contributor address; City; State; Zip Code 100 Congress Ave Suite 1300 Austin, TX 78701	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Armbrust & Brown
Date 06/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arndt, Amy <hr/> Contributor address; City; State; Zip Code 3915 Becker Ave Austin, TX 78751	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Customer Success		Employer (See Instructions) Marketo

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/42 Rpt: 5/64
2 FILER NAME Tovo, Kathrynne		3 Filer ID
4 Date 06/30/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold, Bill <hr/> 6 Contributor address; City; State; Zip Code 3404 Southill Cir Austin, TX 78703	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 02/21/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Brooke <hr/> Contributor address; City; State; Zip Code 1801 W 10TH St Austin, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 04/09/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bartram, Ashley <hr/> Contributor address; City; State; Zip Code 100 Congress Ave Austin, TX 78701	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) State of Texas
Date 04/09/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bartram, John <hr/> Contributor address; City; State; Zip Code 100 Congress Ave Suite 1300 Austin, TX 78701	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Armbrust & Brown
Date 06/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Basciano, Joyce <hr/> Contributor address; City; State; Zip Code 1907 W 34th St Austin, TX 78703	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/42 Rpt: 6/64
2 FILER NAME Tovo, Kathryne		3 Filer ID
4 Date 04/09/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beckham, Kimberly	7 Amount of Contribution (\$) \$350.00
	6 Contributor address; City; State; Zip Code 11205 Limoncillo Ct Austin, TX 78750	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Armbrust & Brown
Date 04/09/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beckham, William Brian	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code 11205 Limoncillo Ct Austin, TX 78750	
Principal occupation / Job title (See Instructions) Real Estate/Ranch Ownership		Employer (See Instructions) Self Employed
Date 02/09/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bednar, Deaton	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 4103 Avenue G Austin, TX 78751	
Principal occupation / Job title (See Instructions) Founder		Employer (See Instructions) Texas Bike Tours
Date 06/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Betts, Charles	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code 14741 Arrowhead Dr Volente, TX 78641	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 02/08/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blizzard, Michael	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 2100 Southern Oaks Austin, TX 78745	
Principal occupation / Job title (See Instructions) Film/PR		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/42 Rpt: 7/64
2 FILER NAME Tovo, Kathrynne		3 Filer ID
4 Date 06/14/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyden, Mark <hr/> 6 Contributor address; City; State; Zip Code 5900 Thames Dr Austin, TX 78723	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) IT Consultant		9 Employer (See Instructions) theNoise
Date 06/17/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Braun, Peggy Davis <hr/> Contributor address; City; State; Zip Code 1801 Lavaca 11-G Austin, TX 78701	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Real Estate Management		Employer (See Instructions) Self Employed
Date 06/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Braun, Peggy Davis <hr/> Contributor address; City; State; Zip Code 1801 Lavaca 11-G Austin, TX 78701	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Real Estate Management		Employer (See Instructions) Self Employed
Date 03/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brice, William <hr/> Contributor address; City; State; Zip Code 2502 Pinewood Ter Austin, TX 78757	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) vice president of operations		Employer (See Instructions) Downtown Austin Alliance
Date 06/14/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brodnax, Pat <hr/> Contributor address; City; State; Zip Code 1105 W Annie Austin, TX 78704	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Managing Director		Employer (See Instructions) Save Our Springs Alliance

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/42 Rpt: 8/64
2 FILER NAME Tovo, Kathrynne		3 Filer ID
4 Date 06/29/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brodnax, Pat <hr/> 6 Contributor address; City; State; Zip Code 1105 W Annie Austin, TX 78704	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Managing Director		9 Employer (See Instructions) Save Our Springs Alliance
Date 04/08/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Frank B. <hr/> Contributor address; City; State; Zip Code 602 Coquina Ln Austin, TX 78746	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Armbrust & Brown
Date 04/08/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Janice P. <hr/> Contributor address; City; State; Zip Code 602 Coquina Ln Austin, TX 78746	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Capsa Inc
Date 06/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Lisa <hr/> Contributor address; City; State; Zip Code PO Box 4767 Austin, TX 78765	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) UT Austin
Date 03/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bunch, William <hr/> Contributor address; City; State; Zip Code 1307 Oxford Ave Austin, TX 78704	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Save Our Springs

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/42 Rpt: 9/64
2 FILER NAME Tovo, Kathrynne		3 Filer ID
4 Date 06/18/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bunch, William 6 Contributor address; City; State; Zip Code 1307 Oxford Ave Austin, TX 78704	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) SOS Alliance
Date 02/08/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burkhardt, William Contributor address; City; State; Zip Code 802 CHRISTOPHER St Austin, TX 78704	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) brkartstudio
Date 04/07/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Byars, Anne Contributor address; City; State; Zip Code 100 Congress Ave Suite 1300 Austin, TX 78701	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) N/A
Date 04/07/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Byars, Samuel Contributor address; City; State; Zip Code 100 Congress Ave Suite 1300 Austin, TX 78701	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Armbrust & Brown
Date 03/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlson, Michelle Contributor address; City; State; Zip Code 903 W 31st St Austin, TX 78705	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/42 Rpt: 10/64
2 FILER NAME Tovo, Kathrynne		3 Filer ID
4 Date 04/07/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlson, Michelle 6 Contributor address; City; State; Zip Code 1609 Mohle Dr Austin, TX 78703	7 Amount of Contribution (\$) \$350.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Carlson Law, PLLC
Date 04/07/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlson, Patrick Contributor address; City; State; Zip Code 1609 Mohle Dr Austin, TX 78703	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Armbrust & Brown
Date 02/05/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chimenti, Danette Contributor address; City; State; Zip Code 200 The Cir Austin, TX 78704	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 06/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clinton, Ryan Contributor address; City; State; Zip Code 4714 Timberline Austin, TX 78746	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Davis Gerald and Cremer
Date 02/10/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cofer, George Contributor address; City; State; Zip Code 3306 GENTRY Dr Austin, TX 78746	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Hill Country Conservatory

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/42 Rpt: 11/64
2 FILER NAME Tovo, Kathrynne		3 Filer ID
4 Date 04/02/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cofer, Rick <hr/> 6 Contributor address; City; State; Zip Code 1621 Enfield Road A Austin, TX 78703	7 Amount of Contribution (\$) \$350.00
8 Principal occupation / Job title (See Instructions) Attorney at Law		9 Employer (See Instructions) Law Office of Rick Cofer, PLLC
Date 02/08/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cohen, Jeffrey <hr/> Contributor address; City; State; Zip Code 8506 Emerald Hill Dr Austin, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Austin History Center Association
Date 06/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cohen, Jeffrey <hr/> Contributor address; City; State; Zip Code 8506 EMERALD HILL Dr Austin, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Austin History Center Association
Date 03/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coldwell, Matt <hr/> Contributor address; City; State; Zip Code 710 W Gibson St Austin, TX 78704	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 06/14/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collen, Cyndi <hr/> Contributor address; City; State; Zip Code 210 Fletcher St Austin, TX 78704	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Flourish Psychotherapy & Nutrition

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/42 Rpt: 12/64
2 FILER NAME Tovo, Kathryne		3 Filer ID
4 Date 02/04/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Beth <hr/> 6 Contributor address; City; State; Zip Code 405 E 14th St El Dorado, AR 71730	7 Amount of Contribution (\$) \$350.00
8 Principal occupation / Job title (See Instructions) Homemaker		9 Employer (See Instructions) N/A
Date 06/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Sarah <hr/> Contributor address; City; State; Zip Code 4613 Duval St Austin, TX 78751	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Healthcare planner		Employer (See Instructions) Community Care Collaborative
Date 06/27/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooper, Lanetta <hr/> Contributor address; City; State; Zip Code 5008 Eilers Ave Austin, TX 78751	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Texas Legal Services Center
Date 06/18/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cousar, James <hr/> Contributor address; City; State; Zip Code 1110 W 7th St Austin, TX 78703	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self Employed
Date 02/08/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curry, Michael <hr/> Contributor address; City; State; Zip Code 700 Lavaca Suite 1400 Austin, TX 78701	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Mediator		Employer (See Instructions) Self-employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/42 Rpt: 13/64
2 FILER NAME Tovo, Kathrynne		3 Filer ID
4 Date 06/29/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curry, Michael <hr/> 6 Contributor address; City; State; Zip Code 700 Lavaca #1400 Austin, TX 78701	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Mediator		9 Employer (See Instructions) Self-employed
Date 03/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DasGupta, Sumit <hr/> Contributor address; City; State; Zip Code 8900 Bluegrass Dr Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 06/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deuser, Larry <hr/> Contributor address; City; State; Zip Code 111 Rudder Dr Austin, TX 78738	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 04/06/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DiQuinzio, Joe <hr/> Contributor address; City; State; Zip Code 204 Westhaven Dr Austin, TX 78746	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) JadCo Development Inc
Date 03/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dittmar, Ronald <hr/> Contributor address; City; State; Zip Code 904 Ebony St Austin, TX 78704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Certified Public Accountant		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/42 Rpt: 14/64
2 FILER NAME Tovo, Kathryne		3 Filer ID
4 Date 06/16/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dolis, George <hr/> 6 Contributor address; City; State; Zip Code 704 W Gibson St Austin, TX 78704	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 02/08/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Downer, Jane <hr/> Contributor address; City; State; Zip Code 517 E Mary St Austin, TX 78704	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 02/08/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Downer, Michael <hr/> Contributor address; City; State; Zip Code 517 E Mary St Austin, TX 78704	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) UT Austin
Date 06/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunkerley, Betty <hr/> Contributor address; City; State; Zip Code 299 Makaha Bastrop, TX 78602	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Consulting		Employer (See Instructions) Self-employed
Date 02/04/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eckelkamp, Carol <hr/> Contributor address; City; State; Zip Code 1204 Bentwood Rd Austin, TX 78722	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Medicare Insurance Professional		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/42 Rpt: 15/64
2 FILER NAME Tovo, Kathrynne		3 Filer ID
4 Date 06/29/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellinger, Jim <hr/> 6 Contributor address; City; State; Zip Code 620 Fairfield Ln Austin, TX 78751	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Radio		9 Employer (See Instructions) Austin Airwaves
Date 06/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Epstein, Barbara <hr/> Contributor address; City; State; Zip Code 701 Texas Ave Austin, TX 78705	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-employed
Date 05/08/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fasenmyer, Timothy <hr/> Contributor address; City; State; Zip Code 4501 Ridge Oak Dr Austin, TX 78731	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) MTF Electric, LLC
Date 06/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fincher, Chris <hr/> Contributor address; City; State; Zip Code 17708 Cormac Ct Pflugerville, TX 78660	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Sales Representative		Employer (See Instructions) Kwall Paints
Date 06/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fincher, Tiffany <hr/> Contributor address; City; State; Zip Code 17708 Cormac Ct Pflugerville, TX 78660	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions) Journeyman Construction

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/42 Rpt: 16/64
2 FILER NAME Tovo, Kathryne		3 Filer ID
4 Date 04/04/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flahive, Kevin <hr/> 6 Contributor address; City; State; Zip Code 5010 Finley Dr Austin, TX 78731	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Armbrust & Brown
Date 04/09/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flahive, Shannon <hr/> Contributor address; City; State; Zip Code 5010 Finley Dr Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) N/A
Date 02/04/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flatau, Gretchen <hr/> Contributor address; City; State; Zip Code 3200 Grandview St Apt. 7 Austin, TX 78705	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Nonprofit Manager		Employer (See Instructions) College Houses
Date 06/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foster, Kevin <hr/> Contributor address; City; State; Zip Code 12100 Metric Blvd Austin, TX 78758	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) UT
Date 03/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fraser, Russell <hr/> Contributor address; City; State; Zip Code 507 Lockhart Dr Austin, TX 78704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/42 Rpt: 17/64
2 FILER NAME Tovo, Kathrynne		3 Filer ID
4 Date 03/15/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fraser, Sally 6 Contributor address; City; State; Zip Code 507 Lockhart Dr Austin, TX 78704	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 06/19/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fries, Mark Contributor address; City; State; Zip Code 606 Highland Ave #B Austin, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 06/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goll, Kurt Contributor address; City; State; Zip Code 1925 Cypress Pt W Austin, TX 78746	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) JCI Residential/Journeyman Group
Date 06/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goll, Michelle Contributor address; City; State; Zip Code 1925 Cypress Pt W Austin, TX 78746	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Director of Interiors		Employer (See Instructions) JCI Residential
Date 03/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gosselink, Margaret Contributor address; City; State; Zip Code 903 W 16th St Austin, TX 78701	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/42 Rpt: 18/64
2 FILER NAME Tovo, Kathryn		3 Filer ID
4 Date 03/15/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gosselink, Paul <hr/> 6 Contributor address; City; State; Zip Code 903 W 16th St Austin, TX 78701	7 Amount of Contribution (\$) \$175.00
8 Principal occupation / Job title (See Instructions) attorney		9 Employer (See Instructions) Lloyd Gosselink
Date 04/09/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gottesman, Lisa <hr/> Contributor address; City; State; Zip Code 1900 Scenic Dr Austin, TX 78703	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) N/A
Date 04/09/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gottesman, Sanford <hr/> Contributor address; City; State; Zip Code 1900 Scenic Dr Austin, TX 78703	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Gottesman Company
Date 06/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregorcyk, David <hr/> Contributor address; City; State; Zip Code 3200 Grandview #6 Austin, TX 78705	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) vice president and general counsel		Employer (See Instructions) Journeyman Group
Date 06/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregorcyk, Jennifer <hr/> Contributor address; City; State; Zip Code 3200 Grandview #6 Austin, TX 78705	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Managing Partner		Employer (See Instructions) Apron Food

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/42 Rpt: 19/64
2 FILER NAME Tovo, Kathrynne		3 Filer ID
4 Date 04/19/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregory, Bob <hr/> 6 Contributor address; City; State; Zip Code 11911 Bradshaw Rd Austin, TX 78747	7 Amount of Contribution (\$) \$350.00
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) Texas Disposal Systems
Date 04/19/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregory, Kay <hr/> Contributor address; City; State; Zip Code 11911 Bradshaw Rd Austin, TX 78747	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Personal Assistant		Employer (See Instructions) Texas Disposal System
Date 06/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanlon, Ellie <hr/> Contributor address; City; State; Zip Code 4801 Caswell Ave Austin, TX 78751	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Researcher		Employer (See Instructions) Texas Education Agency
Date 02/09/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harden, Joi <hr/> Contributor address; City; State; Zip Code 10507 Cooper Hill Dr Austin, TX 78758	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Policy Advisor		Employer (See Instructions) City of Austin
Date 05/04/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harden, Joi <hr/> Contributor address; City; State; Zip Code 10507 Cooper Hill Dr Austin, TX 78758	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Policy Advisor		Employer (See Instructions) City of Austin

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/42 Rpt: 20/64
2 FILER NAME Tovo, Kathryne		3 Filer ID
4 Date 05/15/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Jerry <hr/> 6 Contributor address; City; State; Zip Code 111 Congress Ave Suite 1400 Austin, TX 78701	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Partner/Attorney		9 Employer (See Instructions) Husch Blackwell
Date 03/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hatch, Tom <hr/> Contributor address; City; State; Zip Code 1102 E 8th St B Austin, TX 78702	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Hatch Architects
Date 04/09/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawkins, Kelley <hr/> Contributor address; City; State; Zip Code 5805 Carry Back Ln Austin, TX 78746	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) Self Employed
Date 04/09/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawkins, Mark <hr/> Contributor address; City; State; Zip Code 5805 Carry Back Ln Austin, TX 78746	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Armbrust & Brown
Date 06/14/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heinen, Anne <hr/> Contributor address; City; State; Zip Code 3010 Washington Sq Austin, TX 78705	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Writer/Editor		Employer (See Instructions) Self-employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/42 Rpt: 21/64
2 FILER NAME Tovo, Kathrynne		3 Filer ID
4 Date 06/14/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heinen, Anne <hr/> 6 Contributor address; City; State; Zip Code 3010 Washington Sq Austin, TX 78705	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Writer/Editor		9 Employer (See Instructions) Self-employed
Date 06/14/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heinen, Dirk <hr/> Contributor address; City; State; Zip Code 3010 Washington Sq Austin, TX 78705	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Acumera, Inc.
Date 06/14/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heinen, Dirk <hr/> Contributor address; City; State; Zip Code 3010 Washington Sq Austin, TX 78705	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Acumera, Inc.
Date 06/27/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hicks, Shannon <hr/> Contributor address; City; State; Zip Code 901 W 31 St Austin, TX 78705	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) National Instruments
Date 04/09/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hobbs, Jeff <hr/> Contributor address; City; State; Zip Code 4904 W Park Dr Austin, TX 78731	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Armbrust & Brown

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/42 Rpt: 22/64
2 FILER NAME Tovo, Kathryne		3 Filer ID
4 Date 04/09/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hobbs, Lisa	7 Amount of Contribution (\$) \$350.00
	6 Contributor address; City; State; Zip Code 4904 W Park Dr Austin, TX 78731	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) KuhnHobbs, PLLC
Date 06/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holleran, Michael	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code 3811 Ridgelea Austin, TX 78731	
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) University of Texas
Date 04/08/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollingsworth, Desiree	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code 504 Furlong Dr Austin, TX 78746	
Principal occupation / Job title (See Instructions) Jewelry Retailer		Employer (See Instructions) Self Employed
Date 04/08/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollingsworth, Wayne	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code 504 Furlong Dr Austin, TX 78746	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Armbrust & Brown
Date 02/10/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Jo	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code 1801 West Ave Austin, TX 78701	
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) Seton Family of Hospitals

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/42 Rpt: 23/64
2 FILER NAME Tovo, Kathrynne		3 Filer ID
4 Date 06/28/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huston, Christine <hr/> 6 Contributor address; City; State; Zip Code 4206 Avenue D Austin, TX 78751	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) N/A		9 Employer (See Instructions) N/A
Date 06/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jamroz, David <hr/> Contributor address; City; State; Zip Code 11904 Knights Brg Austin, TX 78759	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) senior estimator		Employer (See Instructions) Journeyman Construction
Date 02/08/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jamroz, Raquel Jane <hr/> Contributor address; City; State; Zip Code 11904 Knights Brg Austin, TX 78759	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) San Petra Studios
Date 06/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jimenez, Kisla <hr/> Contributor address; City; State; Zip Code 3012 West Ave Austin, TX 78705	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Tesoros Trading Company
Date 04/07/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Annette <hr/> Contributor address; City; State; Zip Code 100 congress Austin, TX 78701	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Team Lead		Employer (See Instructions) State of Texas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/42 Rpt: 24/64
2 FILER NAME Tovo, Kathryne		3 Filer ID
4 Date 04/07/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Ken 6 Contributor address; City; State; Zip Code 100 congress Austin, TX 78701	7 Amount of Contribution (\$) \$350.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Armbrust & Brown
Date 06/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jung, Richard Contributor address; City; State; Zip Code 6500 Lost Horizon Dr Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Duggins Wren Mann & Romero, LLP
Date 05/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, Karen Contributor address; City; State; Zip Code 3701 Bonnie Rd Austin, TX 78703	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Counselor		Employer (See Instructions) Karen Kelly
Date 03/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, Michael Contributor address; City; State; Zip Code 4806 Timberline Dr Austin, TX 78746	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) public issues consulting		Employer (See Instructions) Mike Kelly Consulting
Date 04/11/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Sara Contributor address; City; State; Zip Code 606 Highland Ave #B Austin, TX 78703	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/42 Rpt: 25/64
2 FILER NAME Tovo, Kathrynne		3 Filer ID
4 Date 06/16/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Sara <hr/> 6 Contributor address; City; State; Zip Code 606 Highland Ave #B Austin, TX 78703	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 06/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keohane, Cynthia <hr/> Contributor address; City; State; Zip Code 5702 Wynona Ave Austin, TX 78756	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Software test manager		Employer (See Instructions) Self-employed
Date 02/07/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kim, Paul <hr/> Contributor address; City; State; Zip Code 10524 Roy Butler Dr Austin, TX 78717	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) ATX Environmental Solutions
Date 02/07/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kim, Sarah <hr/> Contributor address; City; State; Zip Code 10524 Roy Butler Dr Austin, TX 78717	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) N/A
Date 04/19/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Bryan <hr/> Contributor address; City; State; Zip Code 1809 Lightsey Austin, TX 78704	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Broadcasting		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/42 Rpt: 26/64
2 FILER NAME Tovo, Kathryne		3 Filer ID
4 Date 02/08/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, David <hr/> 6 Contributor address; City; State; Zip Code 1808 Kerr St Austin, TX 78704	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Homemaker		9 Employer (See Instructions) N/A
Date 03/21/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, David <hr/> Contributor address; City; State; Zip Code 1808 Kerr St Austin, TX 78704	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 06/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinser, Lee <hr/> Contributor address; City; State; Zip Code 201 Lee Barton Dr Austin, TX 78704	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Butler Park Pitch and Putt
Date 06/20/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirk, Sandra <hr/> Contributor address; City; State; Zip Code 2117 Clifton St Austin, TX 78704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 03/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kothmann, Paula <hr/> Contributor address; City; State; Zip Code 311 W Milton St Austin, TX 78704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) realtor		Employer (See Instructions) Brigham Real Estate

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/42 Rpt: 27/64
2 FILER NAME Tovo, Kathrynne		3 Filer ID
4 Date 04/07/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krumme, Gregg <hr/> 6 Contributor address; City; State; Zip Code 10501 Yucca Dr Austin, TX 78759	7 Amount of Contribution (\$) \$350.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Armbrust & Brown
Date 04/07/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krumme, Robin <hr/> Contributor address; City; State; Zip Code 10501 Yucca Dr Austin, TX 78759	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Martin, Disiere, Jefferson & Wisdom, L.L.P.
Date 06/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kumar, Hema <hr/> Contributor address; City; State; Zip Code 1628 Westlake Dr Austin, TX 78746	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) N/A
Date 06/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kumar, Sam <hr/> Contributor address; City; State; Zip Code 1628 Westlake Dr Austin, TX 78746	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Journeyman Group
Date 06/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuykendall, Chris <hr/> Contributor address; City; State; Zip Code 4100 Avenue C 103 Austin, TX 78751	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/42 Rpt: 28/64
2 FILER NAME Tovo, Kathrynne		3 Filer ID
4 Date 04/09/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leiske, Kevin <hr/> 6 Contributor address; City; State; Zip Code 2508 Canterbury St Austin, TX 78702	7 Amount of Contribution (\$) \$350.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self Employed
Date 04/09/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leiske, Marina <hr/> Contributor address; City; State; Zip Code 2508 Canterbury St Austin, TX 78702	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Dog Trainer		Employer (See Instructions) Self Employed
Date 01/26/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lester, Cameron <hr/> Contributor address; City; State; Zip Code 11205 Brushy Glen Dr Austin, TX 78754	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Actuarial Specialist		Employer (See Instructions) Cigna
Date 06/14/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ley, Mary <hr/> Contributor address; City; State; Zip Code 404 W Monroe Austin, TX 78704	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 02/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linder, Nelson <hr/> Contributor address; City; State; Zip Code 1709 E 12th St Austin, TX 78702	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Linder Insurance

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/42 Rpt: 29/64
2 FILER NAME Tovo, Kathryn		3 Filer ID
4 Date 04/06/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Littlefield, Sue <hr/> 6 Contributor address; City; State; Zip Code 204 Westhaven Dr Austin, TX 78746	7 Amount of Contribution (\$) \$350.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Armbrust & Brown
Date 05/07/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lomas, Rachel <hr/> Contributor address; City; State; Zip Code 212 W 33rd St Austin, TX 78705	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Chef		Employer (See Instructions) Self Employed
Date 06/18/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Magierski, Brian <hr/> Contributor address; City; State; Zip Code 11 niles Rd austin, TX 78703	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) COO & President		Employer (See Instructions) Nano Vision
Date 02/07/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marcum, Kristin <hr/> Contributor address; City; State; Zip Code 6905 Jester Blvd Austin, TX 78750	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) President of PR Firm		Employer (See Instructions) Elizabeth Christian PR
Date 02/24/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marks, Scott <hr/> Contributor address; City; State; Zip Code 901 S Mopac Blvd Building 1, Suite 500 Austin, TX 78746	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Coats Rose, P.C.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/42 Rpt: 30/64
2 FILER NAME Tovo, Kathryne		3 Filer ID
4 Date 06/15/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Matthew <hr/> 6 Contributor address; City; State; Zip Code 6810 Deatonhill Dr 3101 Austin, TX 78745	7 Amount of Contribution (\$) \$350.00
8 Principal occupation / Job title (See Instructions) Certified Public Accountant		9 Employer (See Instructions) JCI Residential
Date 03/24/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGraw, Karen <hr/> Contributor address; City; State; Zip Code 4315 Avenue C Austin, TX 78751	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Self Employed
Date 05/16/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGraw, Karen <hr/> Contributor address; City; State; Zip Code 4315 Avenue C Austin, TX 78751	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Karen McGraw AIA
Date 06/27/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGraw, Karen <hr/> Contributor address; City; State; Zip Code 4315 Avenue C Austin, TX 78751	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Self-employed
Date 02/05/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meisenbach, Albert <hr/> Contributor address; City; State; Zip Code 1800 San Gabriel St Austin, TX 78701	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/42 Rpt: 31/64
2 FILER NAME Tovo, Kathrynne		3 Filer ID
4 Date 02/05/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meisenbach, Megan <hr/> 6 Contributor address; City; State; Zip Code 1800 San Gabriel St Austin, TX 78701	7 Amount of Contribution (\$) \$350.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 06/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Middleton, James <hr/> Contributor address; City; State; Zip Code 908 W Monroe St Austin, TX 78704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 06/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millea, Susan <hr/> Contributor address; City; State; Zip Code 5806 MARILYN Dr Austin, TX 78757	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Data Analyst		Employer (See Instructions) Children's Optimal Health
Date 03/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Gayle <hr/> Contributor address; City; State; Zip Code 720 Park Blvd Austin, TX 78751	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Kirk <hr/> Contributor address; City; State; Zip Code PO Box 4023 Austin, TX 78765	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Securities Investor		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 29/42 Rpt: 32/64

2 FILER NAME

Tovo, Kathrynne

3 Filer ID

4 Date
06/30/2018

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

Moore, Catherine

6 Contributor address; City; State; Zip Code

12000 Saxony Ln

Austin, TX 78727

7 Amount of Contribution (\$)
\$350.00

8 Principal occupation / Job title (See Instructions)

Retired

9 Employer (See Instructions)

N/A

Date
03/15/2018

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

Morrow, Donna

Contributor address; City; State; Zip Code

504 Terrace Dr

Austin, TX 78704

Amount of Contribution (\$)
\$25.00

Principal occupation / Job title (See Instructions)

RN

Employer (See Instructions)

Austin Eye

Date
06/14/2018

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

Morrow, Donna

Contributor address; City; State; Zip Code

504 Terrace Dr

Austin, TX 78704

Amount of Contribution (\$)
\$30.00

Principal occupation / Job title (See Instructions)

Seamstress

Employer (See Instructions)

Self-employed

Date
06/15/2018

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

Mussey, Sarah

Contributor address; City; State; Zip Code

6810 Deatonhill Dr

3101

Austin, TX 78745

Amount of Contribution (\$)
\$350.00

Principal occupation / Job title (See Instructions)

Employee Relations Analyst

Employer (See Instructions)

American Campus Communities

Date
06/29/2018

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

Myhr, Mitylene

Contributor address; City; State; Zip Code

4528 Avenue B

Austin, TX 78751

Amount of Contribution (\$)
\$100.00

Principal occupation / Job title (See Instructions)

Professor

Employer (See Instructions)

St. Edward's University

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/42 Rpt: 33/64
2 FILER NAME Tovo, Kathryne		3 Filer ID
4 Date 02/08/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nabers, Mary Scott <hr/> 6 Contributor address; City; State; Zip Code 901 S Mopac Bldg #100 Austin, TX 78746	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) President/CEO		9 Employer (See Instructions) Strategic Partnerships, Inc.
Date 05/08/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neal, John Scott <hr/> Contributor address; City; State; Zip Code 4501 Ridge Oak Dr Austin, TX 78731	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) management		Employer (See Instructions) F. Scott Holdings LLC
Date 02/08/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neely, Mary Ann <hr/> Contributor address; City; State; Zip Code 1908 Barton Pkwy Austin, TX 78704	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 01/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Quinn, Jim <hr/> Contributor address; City; State; Zip Code 2124 E 6th 403 Austin, TX 78702	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Programmer		Employer (See Instructions) FSO
Date 05/25/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Otto, Gretchen <hr/> Contributor address; City; State; Zip Code 512 E Mary St Austin, TX 78704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Book Production Editor		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/42 Rpt: 34/64
2 FILER NAME Tovo, Kathryne		3 Filer ID
4 Date 02/05/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palaima, Carolyn	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code 505 E 40th St Austin, TX 78751	
8 Principal occupation / Job title (See Instructions) Administrator		9 Employer (See Instructions) St. Edward's University
Date 02/07/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peart, Dewitt	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code 12107 Cottage Promenade Ct Austin, TX 78753	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Downtown Austin Alliance
Date 04/09/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Ashley	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code 2309 Farnswood Cir Austin, TX 78704	
Principal occupation / Job title (See Instructions) Partner		Employer (See Instructions) Thompson & Knight LLP
Date 04/09/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Travis	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code 2309 Farnswood Cir Austin, TX 78704	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Armbrust & Brown
Date 03/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinnelli, Janis	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code PO Box 50038 Austin, TX 78763	
Principal occupation / Job title (See Instructions) CFO		Employer (See Instructions) J. Pinnelli Company LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/42 Rpt: 35/64
2 FILER NAME Tovo, Kathrynne		3 Filer ID
4 Date 03/15/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinnelli, Joe <hr/> 6 Contributor address; City; State; Zip Code PO Box 50038 Austin, TX 78763	7 Amount of Contribution (\$) \$350.00
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) J. Pinnelli Company LLC
Date 02/23/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Radjef, Eric <hr/> Contributor address; City; State; Zip Code 2311 S 2nd St Austin, TX 78704	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Geologist		Employer (See Instructions) Equinor
Date 06/14/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Radjef, Eric <hr/> Contributor address; City; State; Zip Code 2311 S 2nd St Austin, TX 78704	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Geologist		Employer (See Instructions) Equinor
Date 06/14/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Caroline <hr/> Contributor address; City; State; Zip Code 2611 W 49th St Austin, TX 78731	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) CR Solutions
Date 02/04/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Joseph <hr/> Contributor address; City; State; Zip Code 2611 W 49th St Austin, TX 78731	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Independent Research Professional		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/42 Rpt: 36/64
2 FILER NAME Tovo, Kathryn		3 Filer ID
4 Date 06/30/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rice, Kathleen <hr/> 6 Contributor address; City; State; Zip Code 4109 Marks Pl Fort Worth, TX 76116	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Writer/Editor		9 Employer (See Instructions) Self-employed
Date 05/10/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richards, Dan <hr/> Contributor address; City; State; Zip Code 816 Congress Ave 1200 Austin, TX 78701	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Richards Rodriguez @ Skeith
Date 06/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rivera, Jane H <hr/> Contributor address; City; State; Zip Code 1000 Glen Oaks Ct Austin, TX 78702	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 02/07/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roalson, Shay <hr/> Contributor address; City; State; Zip Code 2006 S 2ND St Austin, TX 78704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Civil Engineer		Employer (See Instructions) HDR
Date 06/18/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Romanczak, Marlene <hr/> Contributor address; City; State; Zip Code 11 niles Rd austin, TX 78703	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/42 Rpt: 37/64
2 FILER NAME Tovo, Kathrynne		3 Filer ID
4 Date 03/15/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosas, Rita <hr/> 6 Contributor address; City; State; Zip Code 2206 S 3rd St Austin, TX 78704	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) controller		9 Employer (See Instructions) CGBot LLC
Date 04/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, James <hr/> Contributor address; City; State; Zip Code 1801 B Ann Arbor Ave Austin, TX 78704	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Trail of Lights Foundation
Date 06/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saadeh, Karen <hr/> Contributor address; City; State; Zip Code 4308 Avenue F Austin, TX 78751	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 03/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanger, Mary <hr/> Contributor address; City; State; Zip Code 704 Carolyn Ave Austin, TX 78705	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 06/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schiebel, Cynthia <hr/> Contributor address; City; State; Zip Code 2313 S 2nd St Austin, TX 78704	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/42 Rpt: 38/64
2 FILER NAME Tovo, Kathrynne		3 Filer ID
4 Date 06/19/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sedwick, Shannon <hr/> 6 Contributor address; City; State; Zip Code 350 King Arthur Ct Austin, TX 78746	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Esther's Follies
Date 06/27/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seeger, Patricia <hr/> Contributor address; City; State; Zip Code 6705 Winterberry Dr Austin, TX 78750	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) N/A
Date 02/08/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sessa, Robert <hr/> Contributor address; City; State; Zip Code 813 W James St Austin, TX 78704	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Finance		Employer (See Instructions) State of Texas
Date 06/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shea, Brigid <hr/> Contributor address; City; State; Zip Code 2604 Geraghty Ave Austin, TX 78757	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) County Commissioner		Employer (See Instructions) Travis County
Date 02/21/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siff, Ted <hr/> Contributor address; City; State; Zip Code 604 W 11th St Austin, TX 78701	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Park Place Publications

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/42 Rpt: 39/64
2 FILER NAME Tovo, Kathrynne		3 Filer ID
4 Date 06/16/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Amy <hr/> 6 Contributor address; City; State; Zip Code 902-A Ramble Lane Austin, TX 78745	7 Amount of Contribution (\$) \$350.00
8 Principal occupation / Job title (See Instructions) Chief of Staff		9 Employer (See Instructions) City of Austin
Date 02/08/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Greg <hr/> Contributor address; City; State; Zip Code 7650 Trailside Ests Austin, TX 78724	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Austin Revitalization Authority
Date 03/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sorenson-Hyatt, Kristie <hr/> Contributor address; City; State; Zip Code 1804 Eva St Austin, TX 78704	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) broker/owner		Employer (See Instructions) Eva Street Properties
Date 05/15/2018	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00007922) Southwest Laborers District Council PAC <hr/> Contributor address; City; State; Zip Code 11720 E 21st St Suite D Tulsa, OK 74129	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) affiliated with LIUNA		Employer (See Instructions) SWLDC
Date 06/17/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spann, Julia <hr/> Contributor address; City; State; Zip Code 3810 Duval St Austin, TX 78751	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Co-CEO		Employer (See Instructions) The SAFE Alliance

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/42 Rpt: 40/64
2 FILER NAME Tovo, Kathryne		3 Filer ID
4 Date 06/14/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Speck, Larry <hr/> 6 Contributor address; City; State; Zip Code 800 W 5th St #1102 Austin, TX 78703	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Architect		9 Employer (See Instructions) UT
Date 06/25/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Speer, Carol and Jack <hr/> Contributor address; City; State; Zip Code 1704 Briar St Austin, TX 78704	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Leadership Consulting		Employer (See Instructions) Delta Associates
Date 02/08/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tassin, Jay <hr/> Contributor address; City; State; Zip Code 1001 W 17th St Austin, TX 78701	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) N/A
Date 04/07/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Kim <hr/> Contributor address; City; State; Zip Code 10919 Enchanted Rock Cv Austin, TX 78726	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) N/A
Date 04/07/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Scott <hr/> Contributor address; City; State; Zip Code 10919 Enchanted Rock Cv Austin, TX 78726	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Armbrust & Brown

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/42 Rpt: 41/64
2 FILER NAME Tovo, Kathryne		3 Filer ID
4 Date 06/28/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Todd, David <hr/> 6 Contributor address; City; State; Zip Code 1304 Mariposa Dr #211 Austin, TX 78704	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self Employed
Date 06/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Todd, Wendy <hr/> Contributor address; City; State; Zip Code 1304 Mariposa Dr #211 Austin, TX 78704	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Self Employed
Date 05/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tollett, Jason Blake <hr/> Contributor address; City; State; Zip Code 3701 Bonnie Rd Austin, TX 78703	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Blake Tollett
Date 06/14/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Michael <hr/> Contributor address; City; State; Zip Code 1211 Newning Ave Austin, TX 78704	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) President of the Board		Employer (See Instructions) Mexic Arte Museum
Date 05/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Travillion Campaign, Jeff <hr/> Contributor address; City; State; Zip Code PO Box 2425 Austin, TX 78768	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) County Commissioner		Employer (See Instructions) Travis County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/42 Rpt: 42/64
2 FILER NAME Tovo, Kathryn		3 Filer ID
4 Date 03/15/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trejo, Deborah <hr/> 6 Contributor address; City; State; Zip Code 1717 Briar St Austin, TX 78704	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Attorney/Partner		9 Employer (See Instructions) Kemp Smith Law
Date 06/18/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Troxell, Richard R. <hr/> Contributor address; City; State; Zip Code 4824 Timberline Dr Austin, TX 78746	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Legal Advocate		Employer (See Instructions) Legal Aid
Date 06/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Umphress, John <hr/> Contributor address; City; State; Zip Code 2604 Geraghty Ave Austin, TX 78757	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) City of Austin
Date 04/25/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Sickle, Sally <hr/> Contributor address; City; State; Zip Code PO Box 301660 Austin, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) N/A
Date 04/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Sickle, Sally <hr/> Contributor address; City; State; Zip Code PO Box 301660 Austin, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/42 Rpt: 43/64
2 FILER NAME Tovo, Kathrynne		3 Filer ID
4 Date 06/28/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Sickle, Sally <hr/> 6 Contributor address; City; State; Zip Code PO Box 301660 Austin, TX 78703	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) N/A
Date 05/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Volunteers Organized To promote Equity PAC <hr/> Contributor address; City; State; Zip Code 3571 Far West Blvd PMB 149 Austin, TX 78731	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) pac		Employer (See Instructions) general purpose political action committee
Date 06/14/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Volz, Candace <hr/> Contributor address; City; State; Zip Code 1406 Preston Ave Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Historian		Employer (See Instructions) Volz & Associates, Inc.
Date 06/14/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Jennifer <hr/> Contributor address; City; State; Zip Code 2214 E 18th St Austin, TX 78702	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Senior Program Manager		Employer (See Instructions) National Wildlife Federation
Date 06/17/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webster, Jeff <hr/> Contributor address; City; State; Zip Code 706 W 31st St Austin, TX 78705	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Research Manager		Employer (See Instructions) Trellis Company

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/42 Rpt: 44/64
2 FILER NAME Tovo, Kathryn		3 Filer ID
4 Date 05/16/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weigand, Ingrid <hr/> 6 Contributor address; City; State; Zip Code 704 W Gibson Austin, TX 78704	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) URP Productions
Date 06/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitlow, Elizabeth. <hr/> Contributor address; City; State; Zip Code 1509 Parkway Austin, TX 78703	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 04/07/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitt, Ashley <hr/> Contributor address; City; State; Zip Code 4006 Rosedale Ave Austin, TX 78756	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) N/A
Date 04/07/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitt, Chris <hr/> Contributor address; City; State; Zip Code 4006 Rosedale Ave Austin, TX 78756	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Armbrust & Brown
Date 05/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Brent <hr/> Contributor address; City; State; Zip Code 3401 Fritz Hughes Park Rd Austin, TX 78732	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) project development and research		Employer (See Instructions) Journeyman Construction

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/42 Rpt: 45/64
2 FILER NAME Tovo, Kathrynne		3 Filer ID
4 Date 02/07/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright-Crowe, Greg <hr/> 6 Contributor address; City; State; Zip Code 1508 eva Austin, TX 78704	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Optometrist		9 Employer (See Instructions) Self Employed
Date 04/07/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) York, Andrew <hr/> Contributor address; City; State; Zip Code 3501 mt barker Dr austin, TX 78731	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Armbrust & Brown
Date 04/07/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) York, Laura <hr/> Contributor address; City; State; Zip Code 3501 mt barker Dr austin, TX 78731	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) N/A

LOANS**SCHEDULE E****The Instruction Guide explains how to complete this form.**1 Total pages Schedule E:
Sch: 1/1 Rpt: 46/64

2 FILER NAME

Tovo, Kathrynne

3 Filer ID

4 TOTAL OF UNITEMIZED LOANS

\$ 0.00

5 Date of loan

7 Name of lender

☐ 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

☐ None15 Check if personal funds were deposited into political account
(See Instructions)☐16 GUARANTOR
INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)

☐ not applicable

18 Guarantor address; City; State; Zip Code

20 Principal occupation

21 Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/10 Rpt: 47/64		2 FILER NAME Tovo, Kathrynne		3 Filer ID	
4 Date 06/30/2018		5 Payee name American Association of Notaries			
6 Amount (\$) \$95.94		7 Payee address; City; State; Zip Code 8811 Westheimer Suite 207 Houston, TX 77063			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Notary Application	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 04/25/2018		Payee name Bean, Samuel			
Amount (\$) \$288.00		Payee address; City; State; Zip Code 260 Paramount Avenue Austin, TX 78704			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvassing	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 04/30/2018		Payee name Bean, Samuel			
Amount (\$) \$88.00		Payee address; City; State; Zip Code 260 Paramount Avenue Austin, TX 78704			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvassing	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/10 Rpt: 48/64	2 FILER NAME Tovo, Kathrynne	3 Filer ID
4 Date 05/07/2018	5 Payee name Bean, Samuel	
6 Amount (\$) \$80.00	7 Payee address; City; State; Zip Code 260 Paramount Avenue Austin, TX 78704	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvassing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/21/2018	Payee name Bean, Samuel	
Amount (\$) \$72.00	Payee address; City; State; Zip Code 260 Paramount Avenue Austin, TX 78704	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvassing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/21/2018	Payee name Bean, Samuel	
Amount (\$) \$0.96	Payee address; City; State; Zip Code 260 Paramount Avenue Austin, TX 78704	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvassing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/10 Rpt: 49/64		2 FILER NAME Tovo, Kathrynne		3 Filer ID
4 Date 03/19/2018		5 Payee name Borek, Joseph		
6 Amount (\$) \$256.00		7 Payee address; City; State; Zip Code 4618 Gillis Street Austin, TX 78745		
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvassing
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 06/15/2018		Payee name Burdick, Lucas		
Amount (\$) \$480.00		Payee address; City; State; Zip Code 6810 Pondsdales Lane Austin, TX 78724		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvassing
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 02/06/2018		Payee name Casey Chapman Ross Photography		
Amount (\$) \$216.50		Payee address; City; State; Zip Code 9501 Argyle Drive Austin, TX 78749		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Photography
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/10 Rpt: 50/64	2 FILER NAME Tovo, Kathrynne	3 Filer ID
4 Date 06/15/2018	5 Payee name Donnelly, Rebecca	
6 Amount (\$) \$104.00	7 Payee address; City; State; Zip Code 1700 West 29th Street Austin, TX 78703	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvassing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/26/2018	Payee name El Mercado	
Amount (\$) \$541.25	Payee address; City; State; Zip Code 1302 South First St Austin, TX 78704	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Venue
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/30/2018	Payee name Hauboldt, Chris	
Amount (\$) \$137.50	Payee address; City; State; Zip Code 529 Old Goliad Road Victoria, TX 77905	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/10 Rpt: 51/64		2 FILER NAME Tovo, Kathrynne		3 Filer ID	
4 Date 05/30/2018		5 Payee name Lewis, Alex			
6 Amount (\$) \$296.00		7 Payee address; City; State; Zip Code 8301 Renlon Drive Austin, TX 78757			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvassing	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 05/30/2018		Payee name Merino, Shanon			
Amount (\$) \$136.00		Payee address; City; State; Zip Code 1817 East Oltorf Street Apt. 1099 Austin, TX 78741			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvassing	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 01/30/2018		Payee name O'Quinn, Jim			
Amount (\$) \$1,350.00		Payee address; City; State; Zip Code 2124 East 6th Street #403 Austin, TX 78702			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Development	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/10 Rpt: 52/64	2 FILER NAME Tovo, Kathrynne	3 Filer ID
4 Date 02/16/2018	5 Payee name O'Quinn, Jim	
6 Amount (\$) \$525.00	7 Payee address; City; State; Zip Code 2124 East 6th Street #403 Austin, TX 78702	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Management
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/18/2018	Payee name O'Quinn, Jim	
Amount (\$) \$450.00	Payee address; City; State; Zip Code 2124 East 6th Street #403 Austin, TX 78702	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Management
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/26/2018	Payee name Office Depot	
Amount (\$) \$52.72	Payee address; City; State; Zip Code 907 W 5th St Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/10 Rpt: 53/64		2 FILER NAME Tovo, Kathryn		3 Filer ID	
4 Date 02/08/2018		5 Payee name Office Depot			
6 Amount (\$) \$14.68		7 Payee address; City; State; Zip Code 907 W 5th St Austin, TX 78703			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 01/24/2018		Payee name Peronti, T.J.			
Amount (\$) \$175.00		Payee address; City; State; Zip Code 1302 South First St Austin, TX 78704			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Audio	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/22/2018		Payee name Simpson Ricke, Kathryn			
Amount (\$) \$448.00		Payee address; City; State; Zip Code 503 Tartan Street Austin, TX 78734			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvassing	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/10 Rpt: 54/64	2 FILER NAME Tovo, Kathrynne	3 Filer ID
4 Date 02/06/2018	5 Payee name St. David's Episcopal Church	
6 Amount (\$) \$62.50	7 Payee address; City; State; Zip Code 301 East 8th Street Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Venue
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/30/2018	Payee name Stripe	
Amount (\$) \$857.50	Payee address; City; State; Zip Code 185 Berry Street Suite 550 San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/19/2018	Payee name Texas Democratic Party	
Amount (\$) \$865.00	Payee address; City; State; Zip Code 1106 Lavaca Suite 100 Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense VAN Subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/10 Rpt: 55/64	2 FILER NAME Tovo, Kathrynne	3 Filer ID
4 Date 01/24/2018	5 Payee name Wells Fargo	
6 Amount (\$) \$9.00	7 Payee address; City; State; Zip Code 1601 West 35 th Street Austin, TX 78705	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
9 Complete ONLY if direct expenditure to benefit C/OH		
Date 05/07/2018	Candidate/Officeholder name Whitmarsh, Grace	Office sought Office held
Amount (\$) \$368.00	Payee address; City; State; Zip Code 314 Jamie Way Greenville, TX 75402	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvassing
Complete ONLY if direct expenditure to benefit C/OH		
Date 05/21/2018	Candidate/Officeholder name Whitmarsh, Grace	Office sought Office held
Amount (\$) \$328.00	Payee address; City; State; Zip Code 314 Jamie Way Greenville, TX 75402	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvassing
Complete ONLY if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/10 Rpt: 56/64	2 FILER NAME Tovo, Kathrynne	3 Filer ID
4 Date 06/18/2018	5 Payee name Whitmarsh, Grace	
6 Amount (\$) \$272.00	7 Payee address; City; State; Zip Code 314 Jamie Way Greenville, TX 75402	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvassing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/14/2018	Payee name Y Strategy	
Amount (\$) \$12,436.67	Payee address; City; State; Zip Code 3100 Manor Road Suite H Austin, TX 78723	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvassing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/14/2018	Payee name Y Strategy	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 3100 Manor Road Suite H Austin, TX 78723	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 1/2 Rpt: 57/64		2 FILER NAME Tovo, Kathrynne		3 Filer ID	
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD				\$	
5 Date 04/20/2018		6 Payee name Emerge America			
7 Amount (\$) \$100.00		8 Payee address; City; State; Zip Code 351 California Street Suite 930 San Fransisco, CA 94104			
9 TYPE OF EXPENDITURE		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political			
10 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Sponsorship	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 03/11/2018		Payee name Staples			
Amount (\$) \$5.83		Payee address; City; State; Zip Code 1201 Barbara Jordan Blvd Suite 700 Austin, TX 78723			
TYPE OF EXPENDITURE		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 2/2 Rpt: 58/64	2 FILER NAME Tovo, Kathrynne	3 Filer ID
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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5 Date 05/05/2018	6 Payee name Travis Democratic Party
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7 Amount (\$) \$100.00	8 Payee address; City; State; Zip Code 1311 E 6th Street Austin, TX 78702
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Sponsorship
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11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/26/2018	Payee name Travis Democratic Party
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Amount (\$) \$125.00	Payee address; City; State; Zip Code 1311 E 6th Street Austin, TX 78702
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Sponsorship
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 1/6 Rpt: 59/64		2 FILER NAME Tovo, Kathrynne		3 Filer ID	
4 Date 05/07/2018		5 Payee name Amano Parking Garage			
6 Amount (\$) \$6.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code 2699 Patton Road Roseville, MN 55113			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 01/27/2018		Payee name Assistance League of Austin			
Amount (\$) \$0.81 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 4901 Burnet Road Austin, TX 78756			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 05/02/2018		Payee name Assistance League of Austin			
Amount (\$) \$4.06 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 4901 Burnet Road Austin, TX 78756			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 2/6 Rpt: 60/64	2 FILER NAME Tovo, Kathrynne	3 Filer ID
4 Date 05/16/2018	5 Payee name Assistance League of Austin	
6 Amount (\$) \$1.62 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 4901 Burnet Road Austin, TX 78756	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/25/2018	Payee name Blaise Burdick, Lucas	
Amount (\$) \$408.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 6810 Pondsdaile Lane Austin, TX 78724	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvassing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/17/2018	Payee name FedEx Office	
Amount (\$) \$23.21 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 9222 Burnet Rd Suite 101 Austin, TX 78758	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 3/6 Rpt: 61/64		2 FILER NAME Tovo, Kathrynne		3 Filer ID	
4 Date 06/25/2018		5 Payee name FedEx Office			
6 Amount (\$) \$46.58 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code 2711 Guadalupe St Austin, TX 78705			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 04/07/2018		Payee name Office Depot			
Amount (\$) \$42.20 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 907 W 5th St Austin, TX 78703			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 05/05/2018		Payee name Office Depot			
Amount (\$) \$6.62 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 907 W 5th St Austin, TX 78703			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 4/6 Rpt: 62/64		2 FILER NAME Tovo, Kathrynne		3 Filer ID	
4 Date 04/09/2018		5 Payee name Southwest Rapid Rewards Chase Visa			
6 Amount (\$) \$5.83 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code PO Box 94014 Palatine, IL 60094			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Credit Card Payment		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 05/15/2018		Payee name Southwest Rapid Rewards Chase Visa			
Amount (\$) \$100.00 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code PO Box 94014 Palatine, IL 60094			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Credit Card Payment		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Sponsorship	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 05/15/2018		Payee name Southwest Rapid Rewards Chase Visa			
Amount (\$) \$100.00 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code PO Box 94014 Palatine, IL 60094			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Credit Card Payment		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Sponsorship	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 5/6 Rpt: 63/64		2 FILER NAME Tovo, Kathrynne		3 Filer ID	
4 Date 01/09/2018		5 Payee name Southwest Rapid Rewards Chase Visa			
6 Amount (\$) \$38.52 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code PO Box 94014 Palatine, IL 60094			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Credit Card Payment		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 01/09/2018		Payee name Southwest Rapid Rewards Chase Visa			
Amount (\$) \$82.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code PO Box 94014 Palatine, IL 60094			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Credit Card Payment		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Post Office Rental	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 04/30/2018		Payee name Thompson & Knight LLP			
Amount (\$) \$522.50 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 1900 San Jacinto Center Austin, TX 78701			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Legal Services		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Legal Services	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 6/6 Rpt: 64/64		2 FILER NAME Tovo, Kathyryne		3 Filer ID	
4 Date 06/29/2018		5 Payee name Thompson & Knight LLP			
6 Amount (\$) \$475.00 <input type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code 1900 San Jacinto Center Austin, TX 78701			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Legal Services		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Legal Services	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 05/15/2018		Payee name UPS Store			
Amount (\$) \$0.60 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 1101 West 34th Street Austin, TX 78705			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	