

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

3846

FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers)	2 Total pages filed: <div style="border: 1px solid black; border-radius: 50%; width: 40px; height: 40px; display: flex; align-items: center; justify-content: center; margin: 0 auto;">13</div>
3 CANDIDATE / OFFICEHOLDER NAME	TITLE FIRST MI <p style="text-align: center;">KATHERINE ANN</p> NICKNAME LAST SUFFIX <p style="text-align: center;">"ANN GRAHAM" GRAHAM (CRAVATT)</p>	OFFICE USE ONLY <hr/> Date Received <div style="text-align: center; font-weight: bold; font-size: 1.2em;">FILED</div> <div style="text-align: center; font-weight: bold; font-size: 0.8em;">FEB 10 10 02 AM '98</div>	
4 CANDIDATE / OFFICEHOLDER ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <p>6204 Lost Creek Circle Austin TX 78746</p>	Receipt # HD / PM Amount Date Processed Date Imaged	
5 CAMPAIGN TREASURER NAME	TITLE FIRST MI <p style="text-align: center;">KATHERINE ANN</p> NICKNAME LAST SUFFIX <p style="text-align: center;">"ANN GRAHAM" GRAHAM (CRAVATT)</p>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <p>6204 Lost Creek Circle Austin TX 78746</p>	
6 CAMPAIGN TREASURER ADDRESS (residence or business)	AREA CODE PHONE NUMBER EXTENSION <p>(512) 329-2559</p>	8 REPORT TYPE <input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input 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)	
7 CAMPAIGN TREASURER PHONE	9 PERIOD COVERED Month Day Year THROUGH Month Day Year <p>1 / 1 / 98 THROUGH 1 / 29 / 98</p>	10 ELECTION ELECTION DATE ELECTION TYPE Month Day Year <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any)	12 OFFICE SOUGHT (if known) <p style="text-align: center;">TRAVIS COUNTY COMMISSIONER PCT. 3</p>	
13 DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS <input type="checkbox"/> additional pages	** Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ** Name Address / PO Box; Apt. / Suite #; City; State; Zip Code		

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME "ANN GRAHAM" KATHERINE ANN GRAHAM (CRAVATT) 15 ACCOUNT # (Ethics Commission filers)

16 SUPPORTING POLITICAL COMMITTEE(S)
 ** This listing includes political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. **

<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC <input type="checkbox"/> additional pages	COMMITTEE TYPE	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

17 NO REPORTABLE ACTIVITY
 Check here if no reportable activity occurred during this reporting period. (Sign affidavit below and submit pages 1 and 2 only.)

18 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 5,255.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 12,679.89
OUTSTANDING LOAN TOTALS	5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

19 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.



Ann Graham
 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Ann Graham, this the 9th day of February, 1998, to certify which, witness my hand and seal of office.

Lynn Hopkins Signature of officer administering oath
 LYNN HOPKINS Print name of officer administering oath
 Notary Public Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

5 SCHEDULE A
See Typed PAGES

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

"ANN GRAHAM"

KATHERINE ANN GRAHAM
(CRAVATT)

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Full name of contributor

out of state PAC

7 Amount of contribution (\$)

8 In-kind contribution description(if applicable)

6 Contributor address; City; State; Zip Code

9 Principal occupation

10 Employer (optional)

Date

Full name of contributor

out of state PAC

Amount of contribution (\$)

In-kind contribution description(if applicable)

Contributor address; City; State; Zip Code

Principal occupation

Employer (optional)

Date

Full name of contributor

out of state PAC

Amount of contribution (\$)

In-kind contribution description(if applicable)

Contributor address; City; State; Zip Code

Principal occupation

Employer (optional)

Date

Full name of contributor

out of state PAC

Amount of contribution (\$)

In-kind contribution description(if applicable)

Contributor address; City; State; Zip Code

Principal occupation

Employer (optional)

Date

Full name of contributor

out of state PAC

Amount of contribution (\$)

In-kind contribution description(if applicable)

Contributor address; City; State; Zip Code

Principal occupation

Employer (optional)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

Political Contributions other than Pledges or Loans

Schedule A

Filer Name: "Ann Graham" Katherine Ann Graham (Cravatt)

Date	Full Name of Contributor & Address & Occupation	Amount of Contribution	In-Kind Contribution
1/7/98	Susan G. Morrison 805 W. 10 th St., Suite 101 Austin, TX 78701 Attorney	\$100	
1/9/98	Minton, Burton, Foster & Collins, P.C. 1100 Guadalupe Austin, TX 78701 Law Firm	\$500	
1/12/98	James Cousar 1110 W. 7 th Street Austin, TX 78703 Attorney	\$100	
1/9/98	Barbara Griffith 1105 Chesapeake Dr. Austin, TX 78758 Tax Officer	\$25	
1/12/98	Ray A. Wilkerson 5906 Lookout Mountain Austin, TX 78731 Real Estate	\$250	
1/14/98	Edwin & Waldine Cason 6500 Lancret Hill Circle Austin, TX 78745 Retired MSGT. USAF	\$100	
1/15/98	John P. O'Sullivan, Jr. 2703 Gee Street Austin, TX 78745 Financial Officer	\$25	

1/16/98 TSCPA PAC 1421 W. Mockingbird Ln., Suite 100 Dallas, TX 75247 Accountants - PAC	\$500
1/16/98 Mary Nell Mathis 901 Rio Grande Austin, TX 78701 Accountant	\$100
1/16/98 Thomas L. Ausley, P.C. 3307 Northland, Suite 420 Austin TX 78731 Attorney	\$100
1/17/98 Peter Cleaves 3605 Flamevine Cove Austin, TX 78735 College Professor	\$50
1/17/98 Chester Toothman 3110 Brightwood Austin, TX 78746 Law Firm Administrator	\$30
1/20/98 James L. Shawn 905 Terrace Mountain Austin, TX 78746 Attorney	\$100
1/22/98 Fred & Marilyn Klingensmith 6205 Lost Creek Circle Austin, TX 78746 Computer Company Executive	\$500
1/22/98 Robert L. Davis 3607 Pinnacle Austin, TX 78746 Attorney	\$100
1/22/98 Nelda Kubicek 2517 Enfield Road Austin, TX 78709 Day Care Director	\$250

1/22/98 Jerry Harris 1400 Franklin Plaza 111 Congress Austin, TX 78701 Attorney	\$100
1/22/98 Ray Wood & Fine 2700 Bee Caves Road Austin, TX 78746 Attorneys	\$500
1/22/98 Janet Hamilton 816 Congress, Suite 1900 Austin, TX 78701 Attorney	\$100
1/22/98 David & Nancy Fossmeier 2500 Wildgrove Dr. Austin, TX 78704 Real Estate Investors	\$100
1/22/98 Marvin Roscoe 3727 Lost Creek Blvd. Austin, TX 78735 Marketing Professor	\$50
1/22/98 Cox & Rodnick 507 W. 7 th Street Austin, TX 78701 Attorneys	\$50
1/22/98 Bree Buchanan 2906 French Place Austin, TX 78722 Attorney	\$50
1/22/98 Peter Von Wupperfeld 5511C Jim Hogg Ave. Austin, TX 78756 Real Estate Broker	\$100
1/22/98 Annis Kay Barousse 650 Buckwheat Court #6208 Hayward, CA 94544 Property Manager	\$50

1/23/98 James Popp 700 Lavaca, Suite 720 Austin, TX 78701 Attorney	\$100
1/23/98 Molly Bean 1209 W. 5 th St. Austin, TX 78703 Attorney	\$25
1/23/98 BM&OH Electro-Pac 1400 Franklin Plaza 111 Congress Ave. Austin, TX 78701 Attorneys - PAC	\$250
1/23/98 Becky Beaver 812 San Antonio St., Suite 211 Austin, TX 78701 Attorney	\$100
1/27/98 Gary Hamil 8406 Horton Trail Austin, TX 78749 Accountant	\$100
1/29/98 Donald M. Carlton 1355 The High Road Austin, TX 78746 Executive - Radian	\$250
1/29/98 Jana King 300 Lowell Lane Austin, TX 78733 Computer Company Owner	\$100
<hr/>	
TOTAL CONTRIBUTIONS	\$5255

1/22/98 Sam Kimberlin 3503 Scenic Hills Drive Austin, TX 78703 Author	\$50
1/22/98 Robert P. Nunis 1101 S. Capital of TX HWY S. Bldg. H, Suite 105 Austin, TX 78746 Attorney	\$50
1/22/98 Christina Morton-Guermouche 7409 Mifflin Kenedy Terrace Austin, TX 78749 Public Information Director	\$25
1/22/98 Shirley Arend 2501 N. Lamar Blvd. Austin, TX 78705 Attorney	\$25
1/22/98 Russell Halvorsen 3203 Pickwick Austin, TX 78746 Detective	\$25
1/22/98 Maria Luisa Flores 2111 Glendale Pl Austin, TX 78704 Attorney	\$25
1/22/98 Carl D. Gustafson 3605 Edgemont Dr. Austin, TX 78731 Attorney	\$25
1/22/98 Florine Cravatt 1612 Glencrest Austin, TX 78723	\$75
1/22/98 Rose Thomas & Pat McLean 1102 Yaupon Valley Rd. Austin, TX 78746 Property Managers	\$100

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POLITICAL EXPENDITURES **SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form. 1 Total pages Schedule F: **5**

2 FILER NAME **"ANN GRAHAM" KATHERINE ANN GRAHAM (CRAVATT)** 3 ACCOUNT # (Ethics Commission filers)

4 Date 1/2/98	5 Payee name TRAVIS COUNTY DEMOCRATIC PARTY	7 Amount (\$) 100.00
6 Payee address; City; State; Zip Code 1905 N. LAMAR AUSTIN, TX 78705		

8 Purpose of expenditure Filing Day Sponsorship	9 <small>** Complete if direct expenditure to benefit C/OH **</small> Candidate / Officeholder name Office sought / held
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Date 1/2/98	Payee name MARSHA MITCHELL	Amount (\$) 300.00
Payee address; City; State; Zip Code 4507 Dorseth Oaks Austin, TX 78727		

Purpose of expenditure Campaign Mgr. Fee	9 <small>** Complete if direct expenditure to benefit C/OH **</small> Candidate / Officeholder name Office sought / held
--	--

Date 1/6/98	Payee name U.S. Postal Service	Amount (\$) 200.00
Payee address; City; State; Zip Code 3217 Bee Caves Rd. Austin, TX 78746		

Purpose of expenditure Stamps for fundraiser	9 <small>** Complete if direct expenditure to benefit C/OH **</small> Candidate / Officeholder name Office sought / held
--	--

Date 1/7/98	Payee name MARSHA MITCHELL	Amount (\$) 20.00
Payee address; City; State; Zip Code 4507 Dorseth Oaks Austin, TX 78746		

Purpose of expenditure Reimbursement for office supplies	9 <small>** Complete if direct expenditure to benefit C/OH **</small> Candidate / Officeholder name Office sought / held
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ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

POLITICAL EXPENDITURES **SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form. 1 Total pages Schedule F: **5**

2 FILER NAME **"ANN GRAHAM" KATHERINE ANN GRAHAM (CRAVAT)** 3 ACCOUNT # (Ethics Commission filers)

4 Date 1/10	5 Payee name Home Depot	7 Amount (\$) \$ 118.31
6 Payee address; City; State; Zip Code 5800 Brodie Austin, TX 78745		

8 Purpose of expenditure Yard sign stakes	9 <small>.. Complete if direct expenditure to benefit C/OH ..</small> Candidate / Officeholder name <small>Office sought / held</small>
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Date 1/12	Payee name Scott Newton	Amount (\$) \$ 297.43
Payee address; City; State; Zip Code 3012 Oak Crest Austin, TX 78704		

Purpose of expenditure Photography	9 <small>.. Complete if direct expenditure to benefit C/OH ..</small> Candidate / Officeholder name <small>Office sought / held</small>
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Date 1/13	Payee name US Postal Service	Amount (\$) \$ 40.00
Payee address; City; State; Zip Code 3217 Bee Caves Rd Austin, TX 78746		

Purpose of expenditure Stamps for mailer	9 <small>.. Complete if direct expenditure to benefit C/OH ..</small> Candidate / Officeholder name <small>Office sought / held</small>
--	---

Date 1/14	Payee name GACC	Amount (\$) \$ 30.00
Payee address; City; State; Zip Code 111 Congress Austin, TX 78701		

Purpose of expenditure Eco. Forecast Breakfast	9 <small>.. Complete if direct expenditure to benefit C/OH ..</small> Candidate / Officeholder name <small>Office sought / held</small>
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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

5

2 FILER NAME

"ANN GRAHAM"

KATHERINE ANN GRAHAM CRAVATT

3 ACCOUNT # (Ethics Commission filers)

4 Date

1/15

5 Payee name

MARSHA MITCHELL

7 Amount (\$)

\$ 800.00

6 Payee address; City; State; Zip Code

4507 Dorset Oaks
Austin, TX 78746

8 Purpose of expenditure

Campaign Mgr. Fee

9 .. Complete if direct expenditure to benefit C/OH ..
Candidate / Officeholder name

Office sought / held

Date

1/16

Payee name

US Postal Service

Amount (\$)

\$ 16.00

Payee address; City; State; Zip Code

3217 Bee Caves Rd
Austin, TX 78746

Purpose of expenditure

Stamps for mailer

.. Complete if direct expenditure to benefit C/OH ..
Candidate / Officeholder name

Office sought / held

Date

1/17

Payee name

MEXICAN AMERICAN DEMOCRATS

Amount (\$)

\$ 10.00

Payee address; City; State; Zip Code

919 Congress
Austin, TX 78701

Purpose of expenditure

Convention + Candidate screening
lunch.. Complete if direct expenditure to benefit C/OH ..
Candidate / Officeholder name

Office sought / held

Date

1/21

Payee name

Office Depot

Amount (\$)

\$ 15.98

Payee address; City; State; Zip Code

2101 S. Lamar
Austin, TX 78704

Purpose of expenditure

Office Supplies

.. Complete if direct expenditure to benefit C/OH ..
Candidate / Officeholder name

Office sought / held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

⑤

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

4 Date

1/22/98

5 Payee name

Shoreline Grill

7 Amount (\$)

\$ 738.23

6 Payee address; City; State; Zip Code

98 San Jacinto Blvd.
Austin, TX 78701

8 Purpose of expenditure

Fundraiser

9 ** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name

Office sought / held

Date

1/23/98

Payee name

MARSHA MITCHELL

Amount (\$)

\$ 425.00

Payee address; City; State; Zip Code

4507 Dorsett Oaks
Austin, TX 78746

Purpose of expenditure

Campaign Mgr Fee

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name

Office sought / held

Date

1/26/98

Payee name

EMORY + YOUNG

Amount (\$)

1,352.61

Payee address; City; State; Zip Code

98 San Jacinto, #600
Austin, TX 78701

Purpose of expenditure

Printing Expense

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name

Office sought / held

Date

1/29

Payee name

US Postal Service

Amount (\$)

\$ 96.00

Payee address; City; State; Zip Code

3217 Bee Caves Rd
Austin, TX 78746

Purpose of expenditure

Postage for mailer

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name

Office sought / held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

5

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

5

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

"ANN GRAHAM"

KATHERINE ANN GRAHAM (GRAHAM CRAVATT)

4 Date

5 Payee name

7 Amount (\$)

Opinion Analysts

\$ 27.06

6 Payee address; City; State; Zip Code

906 Rio Grande
Austin, TX 78701

8 Purpose of expenditure

Voter lists

9 .. Complete if direct expenditure to benefit C/OH ..
Candidate / Officeholder name Office sought / held

Date

Payee name

Amount (\$)

Payee address; City; State; Zip Code

TOTAL =

\$ 4,586.62

Purpose of expenditure

.. Complete if direct expenditure to benefit C/OH ..
Candidate / Officeholder name Office sought / held

Date

Payee name

Amount (\$)

Payee address; City; State; Zip Code

Purpose of expenditure

.. Complete if direct expenditure to benefit C/OH ..
Candidate / Officeholder name Office sought / held

Date

Payee name

Amount (\$)

Payee address; City; State; Zip Code

Purpose of expenditure

.. Complete if direct expenditure to benefit C/OH ..
Candidate / Officeholder name Office sought / held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule G:
2 FILER NAME "ANN GRAHAM" KATHERINE ANN GRAHAM (CRAVATT)		3 ACCOUNT # (Ethics Commission filers)
4 Date 1/2/98	5 Payee name TRAVIS COUNTY DEMOCRATIC PARTY 6 Payee address; City; State; Zip Code 1905 N. LAMAR AUSTIN, TX 78705	8 Amount (\$) \$1,000.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
	7 Purpose of expenditure FILING FEE	
Date 1/26/98	Payee name EMORY * YOUNG Payee address; City; State; Zip Code 98 San Jacinto, #600 AUSTIN, TX 78701	Amount (\$) \$3,500.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
	Purpose of expenditure CAMPAIGN CONSULTING FEE	
Date 1/12/98	Payee name EMORY * YOUNG Payee address; City; State; Zip Code 98 SAN JACINTO AUSTIN, TX 78701	Amount (\$) \$3,581.99 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
	Purpose of expenditure Yard Signs + Stationery	
Date 1/16/98	Payee name Office Depot Payee address; City; State; Zip Code 2101 S. Lamar AUSTIN, TX 78704	Amount (\$) \$ 11.36 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
	Purpose of expenditure Office Supplies	
Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	
	Purpose of expenditure	
		TOTAL = \$8,093.27
		<input type="checkbox"/> Reimbursement from political contributions intended

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