Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT 5103

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: 24

OFFICE USE ONLY

Date Received: 02 MAR -4 PM 1:58

Receipt #

HD / PM | Amount

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

TITLE: Ms. FIRST: Karen MI: M.

NICKNAME: LAST: Sonleitner SUFFIX:

4 CANDIDATE / OFFICEHOLDER ADDRESS

☐ Change of Address

ADDRESS / PO BOX: 1712 Pasadena Drive APT / SUITE #: CITY: Austin STATE: ZIP CODE: 78757 OR P.O. Box 26524 Austin, Tx 78755

5 CAMPAIGN TREASURER NAME

TITLE: FIRST: Annette MI: S.

NICKNAME: LAST: Cootes SUFFIX:

6 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE): 4007 Hyridge APT / SUITE #: CITY: Austin, STATE: Tx ZIP CODE: 78759

7 CAMPAIGN TREASURER PHONE

AREA CODE: (512) PHONE NUMBER: 345-9555 EXTENSION:

8 REPORT TYPE

☐ January 15 ☐ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (officeholder only)

☐ July 15 ☑ 8th day before election ☐ Exceeded $500 limit ☐ Final report (Attach C/OH - FR)

9 PERIOD COVERED

Month / Day / Year: 02/01/02 THROUGH Month / Day / Year: 03/02/02

10 ELECTION

ELECTION DATE Month / Day / Year: 03/12/02

ELECTION TYPE: ☑ Primary ☐ Runoff ☐ General ☐ Special

11 OFFICE

OFFICE HELD (if any): Commissioner - Pct. 2

12 OFFICE SOUGHT (if known): Commissioner -- Pct. 2

13 DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS

•• 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: None

Address / PO Box: Apt. / Suite #: City: State: Zip Code

☐ Additional pages

GO TO PAGE 2

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME	Karen M. Sonleitner	15 ACCOUNT # (Ethics Commission filers)

16 SUPPORTING POLITICAL COMMITTEE(S)

NONE

☐ additional pages

•• 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. ••

COMMITTEE TYPE
☐ GENERAL
☐ SPECIFIC

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	$ 49.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) (Schedule A Totals)	$ 19,403.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$ 0.00
	4. TOTAL POLITICAL EXPENDITURES (Schedules F+G Totals)	$ 23,553.67
OUTSTANDING LOAN TOTALS	5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 0.00

19 AFFIDAVIT

NOTARY PUBLIC STATE OF TEXAS
SHARON ELAINE McKINNEY
Notary Public, State of Texas
My Commission Expires
MARCH 26, 2002

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.

Karen M. Sonleitner
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Karen M Sonleitner, this the 4th day of March, 2002, to certify which, witness my hand and seal of office.

Sharon Elaine McKinney
Signature of officer administering oath

Sharon Elaine McKinney
Print name of officer administering oath

Secretary
Title of officer administering oath

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: 1/11

2 FILER NAME: Karen M. Sonleitner

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out of state PAC / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description(if applicable)
2/4/02	William J. McClellan 11 Sundown Parkway Austin, TX 78746	100	

9 Principal occupation | 10 Employer (optional)

Date	Full name of contributor ☐ out of state PAC / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description(if applicable)
2/4/02	Joseph Lynn Nabers 111 Congress Ave. Suite 1200 Austin, TX 78701	125	

Principal occupation | Employer (optional)

Date	Full name of contributor ☐ out of state PAC / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description(if applicable)
2/4/02	Fulbright + Jaworski LLP Texas Committee 1301 McKinney Suite 5100 Houston, TX 77010	1000	

Principal occupation | Employer (optional)

Date	Full name of contributor ☐ out of state PAC / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description(if applicable)
2/4/02	Christopher S. Shields, P.C. 1005 Congress Ave. Suite 480 Austin, TX 78701	500	

Principal occupation | Employer (optional)

Date	Full name of contributor ☐ out of state PAC / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description(if applicable)
2/4/02	Forrest C. + Rebecca C. Davis 11626 Arroyo Blanco Austin, TX 78748	500	

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.

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: 2/11

2 FILER NAME: Karen M. Sonleitner

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)	9 Principal occupation	10 Employer (optional)
2/4 02	Billy G. Caffey 251 Goodnight Trail Dripping Springs, Tx 78620	500			
2/4 02	Kirk + Amy Rudy 2111 Highgrove Terrace Austin, TX 78703	500			
2/4 02	Jeffrey S. + Valerie J. Newbery 3603 Tekoa Cove Austin, TX 78746	100			
2/4 02	A. Bryce Miller + Melanie C. Taylor 301 Congress Suite 1300 Austin, TX 78701	100			
2/4 02	PBS+J Pol. Action Comm.-Texas 206 Wild Basin Rd. Suite 300 Austin, TX 78746-3343	500			

☐ out of state PAC

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Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: 3/11

2 FILER NAME: Karen M. Sonleitner

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description(if applicable)
2/4/02	Robert S. + Amanda S. Allen 10003 Glen Carrie Lane Austin, TX 78750-4015	1,000	

9 Principal occupation | 10 Employer (optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description(if applicable)
2/4/02	Halff Associates State P.A.C. 8616 Northwest Plaza Dr. Dallas, TX 75225	500	

Principal occupation | Employer (optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description(if applicable)
2/4/02	Mark L. + Gloria R. Hazlewood 5412 Merrywing Circle Austin, TX 78730	125	

Principal occupation | Employer (optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description(if applicable)
2/4/02	Turner, Collie + Braden PAC P.O. Box 130089 Houston, TX 77219	1,000	

Principal occupation | Employer (optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description(if applicable)
2/4/02	Law Office of Robert R. Kamm 405 W. 14th Street Austin, TX 78701	125	

Principal occupation | Employer (optional)

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Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: 4/11

2 FILER NAME: Karen M. Schleitner

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
2/4/02	Ben Turner, Jr. + Lynn Turner 315 Bowie Street Austin, TX 78703-4608	250	

9 Principal occupation | 10 Employer (optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/4/02	Sean C. + Eileen M. Compton 2608 Westover Road Austin, TX 78703	125	

Principal occupation | Employer (optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/4/02	Frank S. Niendorff 7320 N. MoPac Suite 101 Austin, TX 78731	125	

Principal occupation | Employer (optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/4/02	Elizabeth M. Baird Atty. at Law 3401 Aldwych Drive Austin, TX 78704	100	

Principal occupation | Employer (optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/4/02	John Matthew Whelan III 1309 Barclay Drive Austin, TX 78746	500	

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.

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Tote pages Schedule A: 5/11

2 FILER NAME: Karen M. Sonleitner

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor / Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description(if applicable)
2/4 02	Mike Wichern 1504 Alegria Road Austin, TX 78757	500	

9 Principal occupation | 10 Employer (optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description(if applicable)
2/4 02	Robert W. Walker 5842 Westslope Drive Austin, TX 78731	250	

Principal occupation | Employer (optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description(if applicable)
2/4 02	John Noell 3660 Stoneridge #E101 Austin, TX 78746	500	

Principal occupation | Employer (optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description(if applicable)
2/4 02	Paul Warner + Wendy G. Linehan 3502 Lost Creek Blvd. Austin, TX 78735-8208	500	

Principal occupation | Employer (optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description(if applicable)
2/4 02	Roberto O. + Alicia H. Martinez 5905 Thames Drive Austin, TX 78723	50	

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

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: 6/11

2 FILER NAME: Karen M. Sonleitner

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)	9 Principal occupation	10 Employer (optional)
2/4/02	Alan R. + Gay Taylor Ervin 3 Jeffrey Cove Austin, TX 78746	100			
2/4/02	James R. + Robin E. Carpenter 3508 San Mateo Ct. Austin, TX 78738	250			
2/4/02	John G. Fowler 5114 River Oaks Drive Kingsland, TX 78639	500			
2/6/02	Sandy + Carol Dochen 5010 N. Rim Drive Austin, TX 78731	50			
2/6/02	Kenneth C. Aicklen 210 Westhaven Austin, TX 78746	500			

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

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: 7/11

2 FILER NAME: Karen M. Sonleitner

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out of state PAC / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description(if applicable)	9 Principal occupation	10 Employer (optional)
2/6 02	Charles E. + Troylyn W. Ball 16219 Flintrock Road Austin, TX 78738-1718	250			
Date	Full name of contributor ☐ out of state PAC Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description(if applicable)	Principal occupation	Employer (optional)
2/6 02	Jon N. Strange 24823 Lakebriar Drive Katy, TX 77494-1808	1,000			
Date	Full name of contributor (Not a Corp.) ☐ out of state PAC Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description(if applicable)	Principal occupation	Employer (optional)
2/7 02	Mary Nell Mathis, CPA 4807 Spicewood Springs # 1105 Austin, TX 78759	35			
Date	Full name of contributor ☐ out of state PAC Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description(if applicable)	Principal occupation	Employer (optional)
2/9 02	Sandy L. + Lisa Goffesman 1900 Scenic Drive. Austin, TX 78703	250			
Date	Full name of contributor ☐ out of state PAC Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description(if applicable)	Principal occupation	Employer (optional)
2/10 02	E. Scott Polikov + Kris Davis-Jones 3903 Duval Street Austin, TX 78751-5107	100			

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, p ease see instruc tion guide for additional reporting requirements.

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: 8/11

2 FILER NAME: Karen M. Sonleitner

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)	9 Principal occupation	10 Employer (optional)
2/11/02	☐ out of state PAC Larry Sauer + Judith Doran 6117 Highlandale Drive Austin, TX 78731	50			
2/11/02	☐ out of state PAC Mr. Andrew R. Pastor + Mrs. Laura Pastor 4507 Balcones Drive Austin, TX 78731	100			
2/13/02	☐ out of state PAC Andrew D. Rogers Jr. 4110 Honeycomb Rock Cr. Austin, TX 78731	200			
2/14/02	☐ out of state PAC Eleanor C. + Frank J. Smith 316 Lakefront Drive Pt. Venture, TX 78645	125			
2/14/02	☐ out of state PAC John C. Lewis 1717 W. 6th St. #290 Austin, TX 78703	1,000			

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Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: 9/11

2 FILER NAME: Karen M. Sonleitner

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor / Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)	9 Principal occupation	10 Employer (optional)
2/16/02	David N. Smith P.O. Box 537 Austin, TX 78767-0537	50			
2/16/02	Josephine + Joan Huntley 1105 W. 10th Street Austin, TX 78703	20			
2/16/02	Mark Stine + Clemmie Cummins 1403 W. 10th Street Austin, TX 78703	100			
2/18/02	Dick Brown 1108 Lavaca Suite 400 Austin, TX 78701	250			
2/18/02	Gilleland Creek Press (Sole Proprietorship) P.O. Box 676 Pflugerville, TX 78691	150			

☐ out of state PAC

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: 10/11

2 FILER NAME: Karen M. Sonleitner

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
2/22/02	Cesar E. Sylva 12914 Lake Shore Ridge Houston, TX 77041	1,000	

9 Principal occupation | 10 Employer (optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/22/02	ACE-PAC 9800 N. Lamar Blvd. # 255 Austin, TX 78753-4144	500	

Principal occupation | Employer (optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/22/02	John S. + Kathy Landwermeyer 1806 Autumn Fire Drive Cedar Park, TX 78613	100	

Principal occupation | Employer (optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/22/02	John Adair Wooley 3609 Arrowhead Austin, TX 78731	100	

Principal occupation | Employer (optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/27/02	Frank W. Sheppard, III 4733 Palisade Drive Austin, TX 78731	100	

Principal occupation | Employer (optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: 11/11

2 FILER NAME: Karen M. Sonleitner

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)	9 Principal occupation	10 Employer (optional)
2/28/02	☐ out of state PAC AFF-PAC 2101 S. IH35 Suite 403 Austin, TX 78741	500			
Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)	Principal occupation	Employer (optional)
3/1/02	☐ out of state PAC Don Martin 3345 Bee Cave Road Suite 212 Austin, TX 78746		724.00 (Catering)		
Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)	Principal occupation	Employer (optional)
3/1/02	☐ out of state PAC Derlis Salinas, III 9301 Winchester Road Austin, TX 78733		724.00 (Catering)		
Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)	Principal occupation	Employer (optional)
3/2/02	☐ out of state PAC Armbrust + Brown LLP 100 Congress Ave. Suite 1300 Austin, TX 78701-4042	1,000			
Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)	Principal occupation	Employer (optional)
	☐ out of state PAC				

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 1/10

2 FILER NAME: Karen M. Sonleitner

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
2/2 02	Ritz Camera #871 NorthCross Mall Austin, TX 78757	32.48

8 Purpose of expenditure: Photos + film

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
2/3 02	AT+T P.O. Box 78628 Phoenix, AZ 85062-8628	5.76

Purpose of expenditure: Long Distance

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
2/3 02	Time Warner Cable P.O. Box 660097 Dallas, TX 75266-0097	44.95

Purpose of expenditure: Roadrunner Service

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
2/3 02	Ann Denkler 7006 Edgefield Drive Austin, TX 78731	132.15

Purpose of expenditure: Yard stakes (Home Depot) and copies (Austin History Ctr.)

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

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: 2/10

2 FILER NAME: Karen M. Sonleitner

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
2/3 02	Karen Sonleitner 1712 Pasadena Drive Austin, TX 78757	7.00

8 Purpose of expenditure: Reimburse all outstanding out of pocket expenses

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
2/6 02	Worley Printing Co. 3217 N. IH35 Austin, TX 78722	309.83

Purpose of expenditure: Printing

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
2/6 02	Worley Printing Co. 3217 N. IH35 Austin, TX 78722	310.68

Purpose of expenditure: Printing

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
2/6 02	U.S. Postmaster Central Park West Station Austin, TX 78703-1117	315.00

Purpose of expenditure: Stamps

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

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 3/10

2 FILER NAME: Karen M. Sonleitner

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
2/7 02	U.S. Postmaster Downtown Station Austin, TX 78701-2924	74.80

8 Purpose of expenditure: Stamps

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
2/10 02	American Express (For Comp USA Purchase) 9503 Research Austin 78759 Suite 0001 Chicago, IL 60679-0001	2633.59

Purpose of expenditure: Computer/screen/printer

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
2/11 02	Ritz Photos NorthCross Mall Austin, TX 78757	10.80

Purpose of expenditure: Photos

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
2/12 02	Smart Mail 2011 Anchor Lane Austin, TX 78723-5712	1,027.45

Purpose of expenditure: Processing + postage on mailer

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

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: 4/10

2 FILER NAME: Karen M. Sonleitner

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount (S)	8 Purpose of expenditure	9 •• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name / Office sought / held
2/14/02	Capitol Area Demo. Women P.O. Box 12962 Austin, TX 78711	36.00	Dues + luncheon	
2/15/02	Pflugerville Pflag P.O. Box 447 Pflugerville, TX 78691-0447	243.00	Ad (2/21/02 Run date)	
2/15/02	Opinion Analysts 906 Rio Grande Austin, TX 78701	213.79	Labels	
2/15/02	Travis Co. Democratic Party P.O. Box 684263 Austin, TX 78768	400.00	Ad	

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Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 5/10

2 FILER NAME: Karen M. Sonleitner

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
2/18/02	Austin Progressive Coalition c/o 3503 Crownover Street Austin, TX 78725	500.00

8 Purpose of expenditure: Share of printing costs

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
2/19/02	Smart Mail 2011 Anchor Lane Austin, TX 78723-5712	2,435.74-

Purpose of expenditure: Postage + handling mailer

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
2/19/02	Smart Mail 2011 Anchor Lane Austin, TX 78723-5712	2,626.13

Purpose of expenditure: Postage + handling mailer

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
2/20/02	Flower Bucket 3100 N. Lamar Austin, TX 78705	64.95

Purpose of expenditure: Coffees - host thank yous

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

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 6/10

2 FILER NAME: Karen M. Sonleitner

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
2/22/02	Pflugerville Pflag P.O. Box 447 Pflugerville, TX 78691-0447	243.00

8 Purpose of expenditure: Ad (2/28/02 Run date)

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
2/22/02	Gretchen Vaden 6501 Shoal Creek Blvd. Austin, TX 78757	32.79

Purpose of expenditure: Reimbursement: Stamps, Office Max cartridge, Fed Ex.

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
2/22/02	Ann Denkler 7006 Edgefield Drive Austin, TX 78731	125.04

Purpose of expenditure: Reimbursement: Home Depot run - Sign making supplies

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
2/22/02	Austin Chronicle 4000 N. IH35 Austin, TX 78751	711.00

Purpose of expenditure: Ad (2/28/02 Run date)

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

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POLITICAL EXPENDITURES

SCHEDULE I

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule I: 7/10

2 FILER NAME: Karen M. Sonleitner

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
2/22 02	Worley Printing 3217 N. IH35 Austin, TX 78722	4,505.82

8 Purpose of expenditure: Printing: mailers, invites, large signs

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
2/23 02	Office Max 10001 Research Blvd. Suite 300 Austin, TX 78759	84.41

Purpose of expenditure: Printer cartridges

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
2/25 02	Flower Bucket 3100 N. Lamar Austin, TX 78705	32.73

Purpose of expenditure: Coffees – Host thank yous

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
2/25 02	Opinion Analysts 906 Rio Grande Austin, TX 78701	714.57

Purpose of expenditure: Labels

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

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37.28

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 8/10

2 FILER NAME: Karen M. Sonleitner

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
2/25/02	AWPC-PAC P.O. Box 12383 Austin, TX 78711	1000.00

8 Purpose of expenditure: Share of mailer costs

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
2/25/02	Office Max 10001 Research Blvd. Suite 300 Austin, TX 78759	30.27

Purpose of expenditure: Label sheets

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
2/27/02	Smart Mail 2011 Anchor Lane Austin, TX 78723-5712	1893.52

Purpose of expenditure: Postage + handling

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
2/27/02	Smart Mail 2011 Anchor Lane Austin, TX 78723-5712	630.11

Purpose of expenditure: Postage + handling

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

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 9/10

2 FILER NAME: Karen M. Sonleitner

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)	8 Purpose of expenditure	9 •• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name / Office sought / held
2/27/02	David Bintliff 6303 Danwood Austin, TX 78759	272.02	Reimburse for Home Depot run- sign supplies	
2/27/02	Austin Chronicle P.O. Box 49066 Austin, TX 78765	534.00	Ad (3/7/02 Run date)	
2/28/02	U.S. Postmaster Downtown Station Austin, TX 78701-2924	31.50	Stamps	
2/28/02	Federal Express 2001 W. Howard Lane Austin, TX 78753	16.75	Package / Overnight	

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 10/10

2 FILER NAME: Karen M. Sonleitner

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
2/28 02	Pflugerville Pflag P.O. Box 447 Pflugerville, TX 78691-0447	243.00

8 Purpose of expenditure: Ad- (Run date 3/7/02)

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
3/1 02	Karen Sonleitner 1712 Pasadena Drive Austin, TX 78757	10.50

Purpose of expenditure: Reimburse outstanding out of pocket (See Form G)

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)

Purpose of expenditure

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)

Purpose of expenditure

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

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule G: 1/1

2 FILER NAME: Karen M. Sonleitner

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code / 7 Purpose of expenditure	8 Amount ($) / Reimbursement from political contributions intended
2/2 02	HEB 5808 Burnet Road Austin, TX 78756 Faxes	3.22 ☑ Repaid 2/3/02
2/8 02	Four Seasons/San Jacinto Cr. 98 San Jacinto Austin, TX 78701 Parking fee	5.00 ☑ Repaid 3/1/02
2/11 02	AMPCO System 700 Lavaca Austin, TX 78701 Parking fee	1.50 ☑ Repaid 3/1/02
2/28 02	Four Seasons Hotel 98 San Jacinto Austin, TX 78701 Parking fee	4.00 ☑ Repaid 3/1/02
Date	Payee name Payee address; City; State; Zip Code Purpose of expenditure	Amount ($) ☐ Reimbursement from political contributions intended

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