



# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME Huber, Karen (Mrs.)

15 ACCOUNT # (Ethics Commission filers)  
00000001

16 NOTICE FROM POLITICAL COMMITTEE(S)

... This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

17 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	170.00
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2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	38,870.00
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EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$	28.87
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4. TOTAL POLITICAL EXPENDITURES	\$	9,159.75
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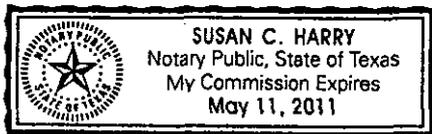
CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	34,830.25
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OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00
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18 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.

*Karen Huber*

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Karen Huber, this the 14<sup>th</sup> day of January, 20 08, to certify which, witness my hand and seal of office.

*Susan C. Harry*  
Signature of officer administering oath

Susan C. Harry  
Print name of officer administering oath

Notary  
Title of officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 1/18 Report: 3/24	
2 FILER NAME Huber, Karen (Mrs.)			3 ACCOUNT # (Ethics Commission filers) 00000001		
4 Date 12/18/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Ayres, Robert (Mr.)		6 Contributor address; City; State; Zip Code 2408 Keating Lane Austin, TX 78703		7 Amount of contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Rancher			9 Employer (See Instructions) Self-employed		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		
4 Date 12/17/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Barnes, Patricia (Ms.)		6 Contributor address; City; State; Zip Code 2901 Bee Cave Rd Ste D Austin, TX 78746-5570		7 Amount of contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Barnes, Lipscomb and Stewart			9 Employer (See Instructions) Estate Planning Attorney		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 2/18 Report: 4/24		
2 FILER NAME Huber, Karen (Mrs.)			3 ACCOUNT # (Ethics Commission filers) 00000001		
4 Date  12/17/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Battles, Charles Jr. (Mr.)		7 Amount of contribution (\$)  \$1,000.00		
6 Contributor address; City; State; Zip Code 28 Lost Meadow Trail Austin, TX 78738-1307					
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired			
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)			
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		
4 Date  12/18/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Brown, George (Mr.)		7 Amount of contribution (\$)  \$500.00		
6 Contributor address; City; State; Zip Code 13 Champion Lane Lakeway, TX 78734-5176					
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired			
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)			
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 3/18 Report: 5/24		
2 FILER NAME Huber, Karen (Mrs.)			3 ACCOUNT # (Ethics Commission filers) 00000001		
4 Date  12/13/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Bugen, Larry (Dr.)  6 Contributor address; City; State; Zip Code 6408 Canon Wren Dr. Austin, TX 78746	7 Amount of contribution (\$)  \$1,000.00			
8 Principal occupation / Job title (See Instructions) Psychologist			9 Employer (See Instructions) Self-employed		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		
4 Date  12/20/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Burciaga, Rick (Mr.)  6 Contributor address; City; State; Zip Code 9801 Stonelake Blvd Austin, TX 78759-6574	7 Amount of contribution (\$)  \$1,000.00			
8 Principal occupation / Job title (See Instructions) Executive Chairman			9 Employer (See Instructions) StoneCrest National Bank of Austin		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 4/18 Report: 6/24	
2 FILER NAME Huber, Karen (Mrs.)				3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date  12/27/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Claypool, James (Mr.) ..... 6 Contributor address; City; State; Zip Code 5009 Little Creek Trail Austin, TX 78669			7 Amount of contribution (\$)  \$200.00	
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		
4 Date  12/17/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Corkran, Dennis (Mr.) ..... 6 Contributor address; City; State; Zip Code 8333 Talbot Lane Austin, TX 78746			7 Amount of contribution (\$)  \$5,000.00	
8 Principal occupation / Job title (See Instructions) Oil & Gas Producer			9 Employer (See Instructions) Corkran Energy		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 5/18 Report: 7/24	
2 FILER NAME Huber, Karen (Mrs.)			3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date  12/18/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Davis, C. Morris III (Mr.)  6 Contributor address; City; State; Zip Code 6211 Ledge Mountain Dr. Austin, TX 78731-3716	7 Amount of contribution (\$)  \$100.00		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)				
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date	
17 Means of transportation		18 Purpose of travel		
4 Date  12/14/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Davis, June (Mrs.)  6 Contributor address; City; State; Zip Code 3607 Pinnacle Rd Austin, TX 78746-7416	7 Amount of contribution (\$)  \$1,000.00		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions) Housewife		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)				
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date	
17 Means of transportation		18 Purpose of travel		

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 6/18 Report: 8/24	
2 FILER NAME Huber, Karen (Mrs.)				3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date  12/27/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Flowers, Betty (Ms.)  6 Contributor address; City; State; Zip Code 2731 Trail of Madrones Austin, TX 78746-6368			7 Amount of contribution (\$)  \$200.00	
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		
4 Date  12/17/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Fulton, Robert (Mr.)  6 Contributor address; City; State; Zip Code P.O. Box 1912 Wimberley, TX 78676			7 Amount of contribution (\$)  \$200.00	
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 7/18 Report: 9/24	
2 FILER NAME Huber, Karen (Mrs.)			3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date  11/26/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Hamilton, Lynn Berry (Ms.) ..... 6 Contributor address; City; State; Zip Code 2101 Treasure Hills Blvd. Apt. 606 Harlingen, TX 78550	7 Amount of contribution (\$)  \$100.00		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)				
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date	
17 Means of transportation		18 Purpose of travel		
4 Date  12/21/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Hogge, John (Mr.) ..... 6 Contributor address; City; State; Zip Code 1319 S. Pace Bend Rd. Austin, TX 78669	7 Amount of contribution (\$)  \$4,000.00		
8 Principal occupation / Job title (See Instructions) Land Owner		9 Employer (See Instructions) Self employed		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)				
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date	
17 Means of transportation		18 Purpose of travel		

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 8/18 Report: 10/24	
2 FILER NAME Huber, Karen (Mrs.)			3 ACCOUNT # (Ethics Commission filers) 00000001		
4 Date  12/19/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Jaynes, James (Mr.)		6 Contributor address; City; State; Zip Code 2212 Real Catorce Austin, TX 78746		7 Amount of contribution (\$)  \$500.00
8 Principal occupation / Job title (See Instructions) Retired			9 Employer (See Instructions) Retired		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		
4 Date  12/31/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) King, Marilla (Mrs.)		6 Contributor address; City; State; Zip Code 12250 Trautwein Rd Austin, TX 78737		7 Amount of contribution (\$)  \$500.00
8 Principal occupation / Job title (See Instructions) Branch manager			9 Employer (See Instructions) Treaty Oak Bank		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 9/18 Report: 11/24	
2 FILER NAME Huber, Karen (Mrs.)				3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date  12/12/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Lebermann, Lowell Jr. (Mr.)  6 Contributor address; City; State; Zip Code 3834 Promontory Point Dr. Austin, TX 78744-1100			7 Amount of contribution (\$)  \$1,500.00	
8 Principal occupation / Job title (See Instructions) Chairman of the Board			9 Employer (See Instructions) Centex Beverage, Inc.		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		
4 Date  12/12/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Lovell, James Dale (Mr.)  6 Contributor address; City; State; Zip Code 1804 Yaupon Valley Rd Austin, TX 78746			7 Amount of contribution (\$)  \$1,000.00	
8 Principal occupation / Job title (See Instructions) Retired			9 Employer (See Instructions) Retired		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 10/18 Report: 12/24	
2 FILER NAME Huber, Karen (Mrs.)			3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date  12/15/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Lowenthal, Eugene I. (Mr.)  6 Contributor address; City; State; Zip Code 9600 Crumley Ranch Rd. Austin, TX 78738-6011	7 Amount of contribution (\$)  \$250.00		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)				
13 Departure city / location		14 Departure date	15 Destination city / location	
16 Arrival date				
17 Means of transportation		18 Purpose of travel		
4 Date  12/31/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Maeder, Edward (Mr.)  6 Contributor address; City; State; Zip Code 108 Champion Dr. Austin, TX 78734-5166	7 Amount of contribution (\$)  \$100.00		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)				
13 Departure city / location		14 Departure date	15 Destination city / location	
16 Arrival date				
17 Means of transportation		18 Purpose of travel		

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 11/18 Report: 13/24	
2 FILER NAME Huber, Karen (Mrs.)			3 ACCOUNT # (Ethics Commission filers) 00000001		
4 Date  12/19/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) McCormick, William (Mr.)		7 Amount of contribution (\$)  \$1,000.00		
6 Contributor address; City; State; Zip Code P.O. Box 5710 Austin, TX 78763-5710					
8 Principal occupation / Job title (See Instructions) Professor			9 Employer (See Instructions) University of Texas		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		
4 Date  12/17/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Nyer, Genie (Mr.)		7 Amount of contribution (\$)  \$200.00		
6 Contributor address; City; State; Zip Code 206 Ashworth Dr. Austin, TX 78746-4604					
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 12/18 Report: 14/24	
2 FILER NAME Huber, Karen (Mrs.)				3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date  12/15/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Penridge, Eleanor (Ms.)			7 Amount of contribution (\$)  \$200.00	
6 Contributor address; City; State; Zip Code 15100 Hamilton Pool Rd Austin, TX 78738-7619					
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		
4 Date  12/31/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Phillips, James (Mr.)			7 Amount of contribution (\$)  \$200.00	
6 Contributor address; City; State; Zip Code 25008 Pedernales Canyon Trail Spicewood, TX 78669					
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 13/18 Report: 15/24	
2 FILER NAME Huber, Karen (Mrs.)				3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date  12/14/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Priour, Damian			7 Amount of contribution (\$)  \$250.00	
6 Contributor address; City; State; Zip Code 17120 Hamilton Pool Rd. Austin, TX 78738					
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		
4 Date  12/10/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Randolph, Robert (Mr.)			7 Amount of contribution (\$)  \$1,000.00	
6 Contributor address; City; State; Zip Code 1812 Albans Houston, TX 77005					
8 Principal occupation / Job title (See Instructions) Attorney			9 Employer (See Instructions) Self Employed		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 14/18 Report: 16/24		
2 FILER NAME Huber, Karen (Mrs.)			3 ACCOUNT # (Ethics Commission filers) 00000001		
4 Date  12/07/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Reese, Pamela (Mrs.)	6 Contributor address; City; State; Zip Code 3511 Westlake Dr. Austin, TX 78746-1610		7 Amount of contribution (\$)  \$10,000.00	
8 Principal occupation / Job title (See Instructions) Retired			9 Employer (See Instructions) Retired		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		
4 Date  12/28/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Rider, Patsy Anne (Ms.)	6 Contributor address; City; State; Zip Code 2906 Hatley Dr. Austin, TX 78746		7 Amount of contribution (\$)  \$500.00	
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions) Retired		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 15/18 Report: 17/24	
2 FILER NAME Huber, Karen (Mrs.)				3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date  12/20/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Sanger, Mary (Ms.)  6 Contributor address; City; State; Zip Code 704 Carolyn Avenue Austin, TX 78705			7 Amount of contribution (\$)  \$250.00	
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		
4 Date  12/14/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Scholar, Marika (Mrs.)  6 Contributor address; City; State; Zip Code 518 Buckeye Trail Austin, TX 78746			7 Amount of contribution (\$)  \$2,500.00	
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions) Housewife		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 16/18 Report: 18/24	
2 FILER NAME Huber, Karen (Mrs.)				3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date  12/17/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Taylor, Leddie (Mr.) ..... 6 Contributor address; City; State; Zip Code 1525 Shannon Pl Carrollton, TX 75006			7 Amount of contribution (\$)  \$100.00	
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		
4 Date  12/19/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Watson, John (Mr.) ..... 6 Contributor address; City; State; Zip Code 1311 Morrow St. Austin, TX 78757			7 Amount of contribution (\$)  \$250.00	
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 17/18 Report: 19/24	
2 FILER NAME Huber, Karen (Mrs.)			3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date  12/18/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) White, Kelly (Ms.)  6 Contributor address; City; State; Zip Code 11 Sundown Parkway Austin, TX 78746	7 Amount of contribution (\$)  \$100.00		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)				
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date	
17 Means of transportation		18 Purpose of travel		
4 Date  12/12/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Wilson, Jerrell (Mr.)  6 Contributor address; City; State; Zip Code 3121 Ski Shores Dr. Austin, TX 78730	7 Amount of contribution (\$)  \$1,000.00		
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Ed A. Wilson, Inc.		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)				
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date	
17 Means of transportation		18 Purpose of travel		

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 18/18 Report: 20/24		
2 FILER NAME Huber, Karen (Mrs.)			3 ACCOUNT # (Ethics Commission filers) 00000001		
4 Date  12/19/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Yates, Roxanne (Ms.)  6 Contributor address: City; State; Zip Code 5711 Hwy. 45 Austin, TX 78739-3014		7 Amount of contribution (\$)  \$1,000.00		
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions) Housewife		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 1/2 Report: 21/24**2** FILER NAME Huber, Karen (Mrs.)**3** ACCOUNT # (Ethics Commission filers)  
00000001**4** Date  
  
12/20/2007**5** Payee name  
GoDaddy.com**7** Amount  
(S)

\$98.50

**6** Payee address; City; State; Zip Code14455 N. Hayden Rd  
Suite 219  
Scottsdale, AZ 85260**8** Purpose of payment  
(See instructions regarding type of information required.)  
Domain Registration**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

Office sought:

Office held:

 Payment for travel outside Texas (complete boxes 10-16)**10** Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)**11** Departure city / location**12** Departure date**13** Destination city / location**14** Arrival date**15** Means of transportation**16** Purpose of travel**4** Date  
  
12/14/2007**5** Payee name  
Newton, Scott (Mr.)**7** Amount  
(S)

\$162.38

**6** Payee address; City; State; Zip Code3012 Oak Crest  
Austin, TX 78704**8** Purpose of payment  
(See instructions regarding type of information required.)  
Photography**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

Office sought:

Office held:

 Payment for travel outside Texas (complete boxes 10-16)**10** Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)**11** Departure city / location**12** Departure date**13** Destination city / location**14** Arrival date**15** Means of transportation**16** Purpose of travel

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 2/2 Report: 22/24**2** FILER NAME Huber, Karen (Mrs.)**3** ACCOUNT # (Ethics Commission filers)  
00000001**4** Date  
  
12/14/2007**5** Payee name  
Opinion Analysts, Inc.**7** Amount  
(\$)  
  
\$3,750.00**6** Payee address; City; State; Zip Code  
.....  
906 Rio Grande St.  
Austin, TX 78701**8** Purpose of payment  
(See instructions regarding type of information required.)  
Consulting Payment for travel outside Texas (complete boxes 10-16)**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

Office sought:

Office held:

**10** Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)**11** Departure city / location**12** Departure date**13** Destination city / location**14** Arrival date**15** Means of transportation**16** Purpose of travel

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 1/2 Report: 23/24	
2 FILER NAME Huber, Karen (Mrs.)			3 ACCOUNT # (Ethics Commission filers) 00000001		
4 Date  11/26/2007	5 Payee name Opinion Analysts, Inc.  6 Payee address; City; State; Zip Code 906 Rio Grande St. Austin, TX 78701	7 Amount (\$)  \$3,750.00	<input checked="" type="checkbox"/> Reimbursement from political contributions intended		
8 Purpose of expenditure (See instructions regarding type of information required.) Consulting  <input type="checkbox"/> Payment for travel outside Texas (complete boxes 9-15)					
9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)					
10 Departure city / location		11 Departure date	12 Destination city / location		13 Arrival date
14 Means of transportation			15 Purpose of travel		
4 Date  12/04/2007	5 Payee name Postnet  6 Payee address; City; State; Zip Code 12400 Hwy. 71 West Suite 350 Austin, TX 78738	7 Amount (\$)  \$120.00	<input checked="" type="checkbox"/> Reimbursement from political contributions intended		
8 Purpose of expenditure (See instructions regarding type of information required.) Post Office Box  <input type="checkbox"/> Payment for travel outside Texas (complete boxes 9-15)					
9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)					
10 Departure city / location		11 Departure date	12 Destination city / location		13 Arrival date
14 Means of transportation			15 Purpose of travel		

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/2 Report: 24/24	
2 FILER NAME Huber, Karen (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date  12/05/2007	5 Payee name Travis County Democratic Party  6 Payee address: City; State; Zip Code P.O. Box 684263 Austin, TX 78768-4263	7 Amount (\$)  \$1,250.00	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
8 Purpose of expenditure (See instructions regarding type of information required.) Filing Fee  <input type="checkbox"/> Payment for travel outside Texas (complete boxes 9-15)			
9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)			
10 Departure city / location	11 Departure date	12 Destination city / location	13 Arrival date
14 Means of transportation		15 Purpose of travel	