

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

6740

FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT #
(Ethics Commission filers)

2 PAGE #
1 of 8

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR FIRST MI
Mrs. Karen
NICKNAME LAST SUFFIX
Huber

OFFICE USE ONLY

Date Received
2008 FEB -4 PM 3:44
FILED FOR RECORD
CLERK
COUNTY CLERK
TRAVIS COUNTY TEXAS

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
P. O. Box 302495
Austin, TX 78703

Date Hand-delivered or Date Postmarked

Receipt # Amount

Date Processed

Date Imaged

Change of Address

5 CAMPAIGN
TREASURER
NAME

MS / MRS / MR FIRST MI
Mrs. Karen
NICKNAME LAST SUFFIX
Huber

6 CAMPAIGN
TREASURER
ADDRESS
(Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
23020 Pedernales Canyon Trail
Spicewood, TX 78669-6431

7 CAMPAIGN
TREASURER
PHONE

AREA CODE PHONE NUMBER EXTENSION
(512) 264-0039

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 THROUGH Month Day Year
01/01/2008 01/24/2008

10 ELECTION

ELECTION DATE ELECTION TYPE
Month Day Year
03/04/2008 Primary Runoff General Special

11 OFFICE

OFFICE HELD (if any)

12 OFFICE SOUGHT (if known)
Travis County Commissioner #3

13 NOTICE
OF 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

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

additional pages

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

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

15 ACCOUNT # (Ethics Commission filers)

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 \$ 0.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 4,750.00

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED \$ 0.00

4. TOTAL POLITICAL EXPENDITURES \$ 6,255.07

CONTRIBUTION BALANCE

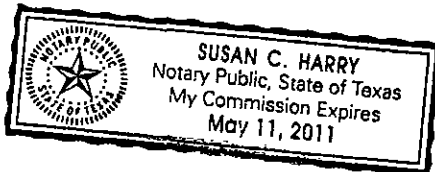
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 33,325.18

OUTSTANDING LOAN TOTALS

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

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 31st day of January, 2008, 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: 1/3 Report: 3/8	
2 FILER NAME Huber, Karen (Mrs.)				3 ACCOUNT # (Ethics Commission filers)	
4 Date 01/02/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Aechternacht, Stephen (Mr.)			7 Amount of contribution (\$) \$500.00	
	6 Contributor address; City; State; Zip Code 4911 Star Canyon Trail Spicewood, TX 78669				
8 Principal occupation / Job title (See Instructions) Health Care			9 Employer (See Instructions) Viant, 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 01/21/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Biggs, Glen (Mr.)			7 Amount of contribution (\$) \$250.00	
	6 Contributor address; City; State; Zip Code #2 Glendalough Court San Antonio, TX 78209				
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: 2/3 Report: 4/8	
2 FILER NAME Huber, Karen (Mrs.)			3 ACCOUNT # (Ethics Commission filers)		
4 Date 01/04/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Lorenz, Perry (Mr.)		7 Amount of contribution (\$) \$1,000.00		
6 Contributor address; City; State; Zip Code 1311-A East 6th Street Austin, TX 78702-3301					
8 Principal occupation / Job title (See Instructions) Real Estate			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 01/17/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Pinnelli, Janis (Mrs.)		7 Amount of contribution (\$) \$1,000.00		
6 Contributor address; City; State; Zip Code P.O. Box 50038 Austin, TX 78763					
8 Principal occupation / Job title (See Instructions) General Contractor			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: 3/3 Report: 5/8	
2 FILER NAME Huber, Karen (Mrs.)		3 ACCOUNT # (Ethics Commission filers)	
4 Date 01/23/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Travis County Sheriffs Law Enforcement Association PAC 6 Contributor address; City; State; Zip Code 8600 Ranch Road 620 N Apt. 210 Austin, TX 78726	7 Amount of contribution (\$) \$2,000.00	
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 EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/3 Report: 6/8	
2 FILER NAME Huber, Karen (Mrs.)		3 ACCOUNT # (Ethics Commission filers)	
4 Date 01/10/2008	5 Payee name Brunt, Chris (Mr.) 6 Payee address; City; State; Zip Code 2408 Manor Rd Apt. 212 Austin, TX	7 Amount (\$) \$1,500.00	
8 Purpose of payment (See instructions regarding type of information required.) Contract Labor <input type="checkbox"/> 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	
4 Date 01/08/2008	5 Payee name Creative Pickle 6 Payee address; City; State; Zip Code 3505 Fleetwood Drive Austin, TX 78704	7 Amount (\$) \$189.44	
8 Purpose of payment (See instructions regarding type of information required.) Graphic Design <input type="checkbox"/> 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

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/3 Report: 7/8	
2 FILER NAME Huber, Karen (Mrs.)		3 ACCOUNT # (Ethics Commission filers)	
4 Date 01/24/2008	5 Payee name Nathan, Mark (Mr.) 6 Payee address; City; State; Zip Code 1627 Barton Springs Austin, TX 78704	7 Amount (\$) \$1,000.00	
8 Purpose of payment (See instructions regarding type of information required.) Consulting <input type="checkbox"/> 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	
4 Date 01/21/2008	5 Payee name Newton, Scott (Mr.) 6 Payee address; City; State; Zip Code 3012 Oak Crest Austin, TX 78704	7 Amount (\$) \$270.63	
8 Purpose of payment (See instructions regarding type of information required.) Photography <input type="checkbox"/> 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

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form. **1** PAGE # Schedule: 3/3 Report: 8/8

2 FILER NAME Huber, Karen (Mrs.) **3** ACCOUNT # (Ethics Commission filers)

4 Date 01/02/2008	5 Payee name Susan Harry Consulting 6 Payee address: City; State; Zip Code 2520 Longview Street Suite 313 Austin, TX 78705	7 Amount (\$) \$2,500.00
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8 Purpose of payment (See instructions regarding type of information required.) Consulting <input type="checkbox"/> 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:
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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 01/02/2008	5 Payee name Travis County Democratic Party 6 Payee address; City; State; Zip Code P.O. Box 684263 Austin, TX 78768-4263	7 Amount (\$) \$795.00
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8 Purpose of payment (See instructions regarding type of information required.) Event Sponsorship/Advertisement <input type="checkbox"/> 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:
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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	