

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

**FORM C/OH
COVER SHEET PG 2**

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

15 ACCOUNT # (Ethics Commission filers)
00232323

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	\$	874.00
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2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	36,825.00
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EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$	401.91
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4. TOTAL POLITICAL EXPENDITURES	\$	21,046.08
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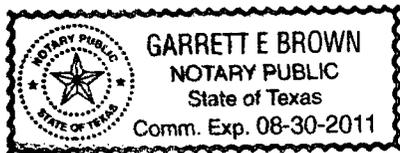
CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	22,648.92
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OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	10,000.00
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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 14th day of Jan, 2009, to certify which, witness my hand and seal of office.

Garrett E Brown Garrett E Brown Notary
Signature of officer administering oath Print name of officer administering oath 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: 1/14 Report: 3/28	
2 FILER NAME Huber, Karen (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00232323	
4 Date 11/20/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) A/TCEMS Employee Association PAC 6 Contributor address; City; State; Zip Code 400 W 14th St Ste B50 Austin, TX 78701	7 Amount of contribution (\$) \$1,000.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 10/30/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Anderson, Mary Contributor address; City; State; Zip Code 5019 Placid Pl Austin, TX 78731	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 10/27/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ashcraft, Elizabeth Contributor address; City; State; Zip Code 4011 Bunny Run Austin, TX 78746	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 10/31/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Attal, Charles Contributor address; City; State; Zip Code 98 San Jacinto Blvd Ste 430 Austin, TX 78701	Amount of contribution (\$) \$1,500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 11/20/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Austin Board of Realtors PAC Contributor address; City; State; Zip Code 10900 Stonelake Blvd Ste 100 Austin, TX 78759	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/14 Report: 4/28	
2 FILER NAME Huber, Karen (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00232323	
4 Date 10/31/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bloom, Virginia 6 Contributor address; City; State; Zip Code 5618 Medicine Creek Dr Austin, TX 78735	7 Amount of contribution (\$) \$150.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 11/20/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) BMcPAC Contributor address; City; State; Zip Code 111 Congress Ave Ste 1400 Austin, TX 78701	Amount of contribution (\$) \$5,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 10/30/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Burciaga, Rick Contributor address; City; State; Zip Code 9801 Stonelake Blvd #437 Austin, TX 78759	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 12/01/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bury, Paul III Contributor address; City; State; Zip Code 221 W 6th St Ste 600 Austin, TX 78701	Amount of contribution (\$) \$2,500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 10/31/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cain, Larry Contributor address; City; State; Zip Code 4216 Cypress Canyon Trl Spicewood, TX 78669	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/14 Report: 5/28	
2 FILER NAME Huber, Karen (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00232323	
4 Date 10/30/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chernet, Tsegaye 6 Contributor address; City; State; Zip Code 1915 Wells Branch Pkwy # 1614 Austin, TX 78728	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 11/20/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Coneway, C. Jr. Contributor address; City; State; Zip Code 8701 Bluecreek Cv Austin, TX 78735	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/31/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cullen, Luanne Contributor address; City; State; Zip Code 9801 Glenlake Dr Austin, TX 78730	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/30/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Deshpande, Saili Contributor address; City; State; Zip Code 10603 Pickfair Dr Austin, TX 78750	Amount of contribution (\$) \$101.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/08/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) DiQuinzio, Joseph Jr. Contributor address; City; State; Zip Code 500 W 7th St Austin, TX 78701	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/14 Report: 6/28	
2 FILER NAME Huber, Karen (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00232323	
4 Date 11/20/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dukette, Scott 6 Contributor address; City; State; Zip Code 4410 Twisted Tree Dr Austin, TX 78735	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/28/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fuelberg, Curtis Contributor address; City; State; Zip Code 1122 Colorado Ste 1501 Austin, TX 78701	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/20/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fulbright & Jaworski LLP TX Committee Contributor address; City; State; Zip Code 600 Congress Ave Ste 2400 Austin, TX 78701	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/20/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Graham, Charles Contributor address; City; State; Zip Code 821 Central Ave Elgin, TX 78621	Amount of contribution (\$) \$750.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/20/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Graves Dougherty Hearon & Moody PC Contributor address; City; State; Zip Code 401 Congress Ave Ste 2200 Austin, TX 78701	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/14 Report: 7/28	
2 FILER NAME Huber, Karen (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00232323	
4 Date 10/30/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Green, Deborah 6 Contributor address; City; State; Zip Code 2400 Pemberton Pl Austin, TX 78703	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 11/20/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gunn, William III Contributor address; City; State; Zip Code 6836 Bee Cave Rd Ste 400 Austin, TX 78746	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/20/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Half Associates State PAC Contributor address; City; State; Zip Code 4030 W Braker Ln Ste 450 Austin, TX 78759	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/30/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hawkins, Benny Contributor address; City; State; Zip Code 2204 Forbes Dr Ste 101 Austin, TX 78754	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/20/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Home Builders Assoc of Greater Austin HomePAC Contributor address; City; State; Zip Code 8140 Exchange Dr Austin, TX 78754	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/14 Report: 8/28	
2 FILER NAME Huber, Karen (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00232323	
4 Date 12/05/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Huthnance, Robert 6 Contributor address; City; State; Zip Code 4001 Harborlight Cv Austin, TX 78731	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 11/20/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Irion, Terrence Contributor address; City; State; Zip Code 2224 Walsh Tarlton Ste 210 Austin, TX 78746	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 10/26/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Issa, Michel Contributor address; City; State; Zip Code 705 C West 24th St Austin, TX 78705	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 10/27/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kassa, Solomon Contributor address; City; State; Zip Code 2958 Donnell Dr Round Rock, TX 78664	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 11/20/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kirfman, Jack Contributor address; City; State; Zip Code 5009 Strass Dr Austin, TX 78731	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/14 Report: 9/28	
2 FILER NAME Huber, Karen (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00232323	
4 Date 12/08/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kucera, Gerald 6 Contributor address; City; State; Zip Code 7200 N MoPac Expwy Ste 450 Austin, TX 78731	7 Amount of contribution (\$) \$5,000.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 12/08/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Locke Lord Bissell & Liddell LLP Contributor address; City; State; Zip Code 100 Congress Ste 300 Austin, TX 78701	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 10/31/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) London, Alice Contributor address; City; State; Zip Code 101 Ridgemont Ct Austin, TX 78746	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 11/04/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lorenz, Perry Contributor address; City; State; Zip Code 1311 E 6th St Ste A Austin, TX 78702	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 10/30/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mc Creary, Frank III Contributor address; City; State; Zip Code 2020 Rice Blvd Houston, TX 77005	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/14 Report: 10/28	
2 FILER NAME Huber, Karen (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00232323	
4 Date 10/30/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McAfee, Mark (Mr.) 6 Contributor address; City; State; Zip Code 10463 Sprinkle Rd Austin, TX 78754	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 10/30/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McAfee, Mark Contributor address; City; State; Zip Code 10463 Sprinkle Rd Austin, TX 78754	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 11/20/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McGinnis Lochridge & Kilgore LLP Contributor address; City; State; Zip Code 600 Congress Ave Ste 2100 Austin, TX 78701	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 11/19/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Meade, Nikelle Contributor address; City; State; Zip Code 111 Congress Ave Ste 1400 Austin, TX 78701	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 10/28/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mersha, Abera Contributor address; City; State; Zip Code 4501 E Riverside Dr Apt 2032 Austin, TX 78741	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 9/14 Report: 11/28	
2 FILER NAME Huber, Karen (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00232323	
4 Date 10/28/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mersha, Zenaw 6 Contributor address; City; State; Zip Code 3304 Montopolis Dr Austin, TX 78744	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9		10 Employer (See Instructions)	
Date 11/20/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Munsch Hardt Kopf & Harr PC Contributor address; City; State; Zip Code 600 Congress Ave Ste 2900 Austin, TX 78701	Amount of contribution (\$) \$1,250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9		10 Employer (See Instructions)	
Date 11/20/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Murfee, George Contributor address; City; State; Zip Code 1101 S Capital of Texas Hwy D-110 Austin, TX 78746	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9		10 Employer (See Instructions)	
Date 10/30/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Murfin, Pam Contributor address; City; State; Zip Code 13903 Murfin Road Austin, TX 78734	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9		10 Employer (See Instructions)	
Date 11/20/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nias, James Contributor address; City; State; Zip Code 100 Congress Ave Ste 1100 Austin, TX 78701	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9		10 Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 10/14 Report: 12/28	
2 FILER NAME Huber, Karen (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00232323	
4 Date 12/30/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nyfeler, John 6 Contributor address; City; State; Zip Code 3215 Hampton Rd Austin, TX 78705	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/30/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Olivier, Edmond Jr. Contributor address; City; State; Zip Code 919 Shannon Meadow Trl Cedar Park, TX 78613	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/19/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pattillo, Ladd Contributor address; City; State; Zip Code 3355 Bee Caves Rd Ste 204 Austin, TX 78746	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/20/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pedersen, Craig Contributor address; City; State; Zip Code 4703 Trail Crest Cir Austin, TX 78735	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/08/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reed, Jerry Contributor address; City; State; Zip Code 510 W 15th St Austin, TX 78701	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 11/14 Report: 13/28	
2 FILER NAME Huber, Karen (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00232323	
4 Date 10/31/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rodnick, Amie 6 Contributor address; City; State; Zip Code 507 W 7th St Austin, TX 78701	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 10/28/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rose, Howard Contributor address; City; State; Zip Code 111 Congress Ave Ste 1400 Austin, TX 78701	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 10/30/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Routh, June Contributor address; City; State; Zip Code 12816 Meehan Drive Austin, TX 78727	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 10/30/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Schless, Michael Contributor address; City; State; Zip Code 1705 Yaupon Valley Rd Austin, TX 78746	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 10/30/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Schweizer, Connie Contributor address; City; State; Zip Code 9737 Elmcrest Dr Dallas, TX 75238	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 12/14 Report: 14/28	
2 FILER NAME Huber, Karen (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00232323	
4 Date 11/12/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shaunessy, Michael (Mr.) 6 Contributor address; City; State; Zip Code 5904 Sir Ivor Cove Austin, TX 78746	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 11/20/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Siff, Theodore Contributor address; City; State; Zip Code 604 W 11th St Austin, TX 78701	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/20/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Henry Contributor address; City; State; Zip Code 12409 Cascade Caverns Trail Austin, TX 78739	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/20/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith Robertson Elliott Glen Klein & Bell LLP Contributor address; City; State; Zip Code 221 W 6th St Ste 1100 Austin, TX 78701	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/01/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Spelman, Niyanta Contributor address; City; State; Zip Code 3802 Avenue F Austin, TX 78751	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 13/14 Report: 15/28	
2 FILER NAME Huber, Karen (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00232323	
4 Date 11/20/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Todd, Bruce 6 Contributor address; City; State; Zip Code 823 Congress Ave Ste 1505 Austin, TX 78701	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 11/26/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Todd, Bruce 6 Contributor address; City; State; Zip Code 823 Congress Ave Ste 1505 Austin, TX 78701	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 11/13/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Travis County Democratic Party 6 Contributor address; City; State; Zip Code P.O. Box 684263 Austin, TX 78768-4263	7 Amount of contribution (\$) \$700.00	8 In-kind contribution description (if applicable) Reimbursement lit. drops
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 10/31/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Warren, Louis 6 Contributor address; City; State; Zip Code 4731 Cat Mountain Dr Austin, TX 78731	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 11/20/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Whitfield, Gail 6 Contributor address; City; State; Zip Code 1520 Ben Crenshaw Way Apt #221 Austin, TX 78746	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The **INSTRUCTION GUIDE** explains how to complete this form.

1 PAGE #
Schedule: 14/14 Report: 16/28

2 FILER NAME Huber, Karen (Mrs.)

3 ACCOUNT # (Ethics Commission filers)
00232323

4 Date
10/29/2008

5 Full name of contributor out-of-state PAC (ID# _____)
Winkelman, Marc

.....

6 Contributor address; City; State; Zip Code
304 Hillcrest Ct
Austin, TX 78746

7 Amount of contribution (\$) | **8** In-kind contribution description (if applicable)

\$500.00 |

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date
10/29/2008

Full name of contributor out-of-state PAC (ID# _____)
Zelege, Mulugeta

.....

Contributor address; City; State; Zip Code
17205 Tobermory
Phlugerville, TX 78660

Amount of contribution (\$) | In-kind contribution description (if applicable)

\$200.00 |

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
10/30/2008

Full name of contributor out-of-state PAC (ID# _____)
Zmud, Johanna

.....

Contributor address; City; State; Zip Code
1402 Wild Basin Ldg
Austin, TX 78746

Amount of contribution (\$) | In-kind contribution description (if applicable)

\$500.00 |

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

PLEGGED CONTRIBUTIONS

SCHEDULE B

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/1 Report: 17/28

2 FILER NAME Huber, Karen (Mrs.)

3 ACCOUNT # (Ethics Commission filers)
00232323

4 TOTAL OF UNITEMIZED PLEDGES: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨ \$

5 Date	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Armbrust, David	8 Amount of pledge (\$)	9 In-kind description (if applicable)
11/18/2008	7 Pledgor address; City; State; Zip Code 100 Congress Ave Ste 1300 Austin, TX 78701	\$2,500.00	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

10 Principal occupation / Job title (See Instructions)	11 Employer (See Instructions)
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Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Gregory, Bob	Amount of pledge (\$)	In-kind description (if applicable)
11/18/2008	Pledgor address; City; State; Zip Code 2939 Westlake Cv Austin, TX 78746	\$2,500.00	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Wheeler, Richard Jr.	Amount of pledge (\$)	In-kind description (if applicable)
11/20/2008	Pledgor address; City; State; Zip Code 16002 Canard Cir Austin, TX 78734	\$1,000.00	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/11 Report: 18/28
2 FILER NAME Huber, Karen (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00232323
4 Date 11/05/2008	5 Payee name American Express 6 Payee address; City; State; Zip Code P.P. Box 53852 Phoenix, AZ 85072-3852	7 Amount (\$) \$4.50
8 Purpose of payment (See instructions regarding type of information required.) credit card fees (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 11/10/2008	Payee name American Express Payee address; City; State; Zip Code P.P. Box 53852 Phoenix, AZ 85072-3852	Amount (\$) \$229.36
Purpose of payment (See instructions regarding type of information required.) credit card fees (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 12/05/2008	Payee name American Express Payee address; City; State; Zip Code P.P. Box 53852 Phoenix, AZ 85072-3852	Amount (\$) \$4.95
Purpose of payment (See instructions regarding type of information required.) credit card fees (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 12/09/2008	Payee name American Express Payee address; City; State; Zip Code P.P. Box 53852 Phoenix, AZ 85072-3852	Amount (\$) \$1.48
Purpose of payment (See instructions regarding type of information required.) credit card fees (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/11 Report: 19/28
2 FILER NAME Huber, Karen (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00232323
4 Date 12/20/2008	5 Payee name Apple Store 6 Payee address; City; State; Zip Code 2901 So. Capital of Texas Hwy Austin, TX 78746	7 Amount (\$) \$2,326.96
8 Purpose of payment (See instructions regarding type of information required.) Laptop computer for services to campaign (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 11/03/2008	Payee name Bank of America Payee address; City; State; Zip Code P. O. BOX 2485 Spokane, WA 99210-2485	Amount (\$) \$291.14
Purpose of payment (See instructions regarding type of information required.) Credit card fees (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 12/01/2008	Payee name Bank of America Payee address; City; State; Zip Code P. O. BOX 2485 Spokane, WA 99210-2485	Amount (\$) \$112.12
Purpose of payment (See instructions regarding type of information required.) Credit card fees (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 11/04/2008	Payee name Bean, Sam (Mr.) Payee address; City; State; Zip Code 1013 W. 23rd St. Austin, TX 78705	Amount (\$) \$100.00
Purpose of payment (See instructions regarding type of information required.) Contract labor (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/11 Report: 20/28
2 FILER NAME Huber, Karen (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00232323
4 Date 11/15/2008	5 Payee name Beers, Stephen (Mr.) 6 Payee address; City; State; Zip Code 107-A E. 47th St. Austin, TX 78751	7 Amount (\$) \$125.00
8 Purpose of payment (See instructions regarding type of information required.) contract labor (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 12/21/2008	Payee name Brown, Garry (Mr.) Payee address; City; State; Zip Code 1824 So. I.H. 35 # 358 Austin, TX 78704	Amount (\$) \$300.00
Purpose of payment (See instructions regarding type of information required.) contract labor (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 11/03/2008	Payee name Butts, David (Mr.) Payee address; City; State; Zip Code 1914 Patton Lane Austin, TX 78723	Amount (\$) \$800.00
Purpose of payment (See instructions regarding type of information required.) consulting (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 11/30/2008	Payee name Checkmark Typesetting Payee address; City; State; Zip Code 3217 No. I. H. 35 Austin, TX 78722	Amount (\$) \$368.05
Purpose of payment (See instructions regarding type of information required.) Printing (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/11 Report: 21/28
2 FILER NAME Huber, Karen (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00232323
4 Date 11/09/2008	5 Payee name Constant Contact 6 Payee address; City; State; Zip Code 1601 Trapelo Rd. #329 Waltham, MA 02451	7 Amount (\$) \$58.44
8 Purpose of payment (See instructions regarding type of information required.) email (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 11/04/2008	Payee name Fosbier, Tom (Mr.) Payee address; City; State; Zip Code 2209 Lawnmont Ave. Austin, TX 78756	Amount (\$) \$100.00
Purpose of payment (See instructions regarding type of information required.) Contract labor (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 10/31/2008	Payee name Garza, Kristina (Ms.) Payee address; City; State; Zip Code 2303 Eastside De. Austin, TX 78704	Amount (\$) \$1,250.00
Purpose of payment (See instructions regarding type of information required.) Contract labor (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 11/15/2008	Payee name Garza, Kristina (Ms.) Payee address; City; State; Zip Code 2303 Eastside Dr. Austin, TX 78704	Amount (\$) \$791.67
Purpose of payment (See instructions regarding type of information required.) contract labor (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/11 Report: 22/28
2 FILER NAME Huber, Karen (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00232323
4 Date 12/03/2008	5 Payee name Garza, Kristina (Ms.) 6 Payee address; City; State; Zip Code 2303 Eastside Dr. Austin, TX 78704	7 Amount (\$) \$1,000.00
8 Purpose of payment (See instructions regarding type of information required.) contract labor (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 10/31/2008	Payee name Garza, Marivel (Ms.) Payee address; City; State; Zip Code 4588 Mather Kyle, TX 78640	Amount (\$) \$750.00
Purpose of payment (See instructions regarding type of information required.) Contract labor (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 11/12/2008	Payee name Global Printing Solutions Payee address; City; State; Zip Code 5114 Balcones Woods Dr. #309 Austin, TX 78759	Amount (\$) \$352.90
Purpose of payment (See instructions regarding type of information required.) printing (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 10/30/2008	Payee name Goss, Delwin (Mr.) Payee address; City; State; Zip Code 6410 Ponca St. Austin, TX 78741	Amount (\$) \$200.00
Purpose of payment (See instructions regarding type of information required.) sign placements (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 6/11 Report: 23/28

2 FILER NAME Huber, Karen (Mrs.)

3 ACCOUNT # (Ethics Commission filers)
00232323

4 Date	5 Payee name Headliner's Club	7 Amount (\$)
12/17/2008	6 Payee address; City; State; Zip Code P.O. Box 97 Austin, TX 78767	\$1,450.45

8 Purpose of payment (See instructions regarding type of information required.) fundraising expenses (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
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Date	Payee name Lowe's	Amount (\$)
11/15/2008	Payee address; City; State; Zip Code 12611 Shops Parkway #100 Bee Caves,, TX 78738	\$30.22

Purpose of payment (See instructions regarding type of information required.) event expenses (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
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Date	Payee name Lowe's	Amount (\$)
11/17/2008	Payee address; City; State; Zip Code 12611 Shops Parkway #100 Bee Caves,, TX 78738	\$37.86

Purpose of payment (See instructions regarding type of information required.) event expenses (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
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Date	Payee name Lucky Mart Bee Caves	Amount (\$)
11/12/2008	Payee address; City; State; Zip Code 14211 Hwy. 71 West Austin, TX 78738	\$19.22

Purpose of payment (See instructions regarding type of information required.) Highway signs (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/11 Report: 24/28
2 FILER NAME Huber, Karen (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00232323
4 Date 11/13/2008	5 Payee name Lucky Mart Bee Caves 6 Payee address; City; State; Zip Code 14211 Hwy. 71 West Austin, TX 78738	7 Amount (\$) \$46.95
8 Purpose of payment (See instructions regarding type of information required.) Highway signs (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 10/28/2008	Payee name Matrix Telecom Payee address; City; State; Zip Code 201 Brookwood Rd. Atmore, AL 36502-3513	Amount (\$) \$72.28
Purpose of payment (See instructions regarding type of information required.) Telephone service (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 11/20/2008	Payee name Matrix Telecom Payee address; City; State; Zip Code 201 Brookwood Rd. Atmore, AL 36502-3513	Amount (\$) \$54.39
Purpose of payment (See instructions regarding type of information required.) Telephone service (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 12/22/2008	Payee name Matrix Telecom Payee address; City; State; Zip Code 201 Brookwood Rd. Atmore, AL 36502-3513	Amount (\$) \$54.39
Purpose of payment (See instructions regarding type of information required.) Telephone service (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/11 Report: 25/28
2 FILER NAME Huber, Karen (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00232323
4 Date 11/03/2008	5 Payee name Neely, Mary Ann (Ms.) 6 Payee address; City; State; Zip Code 1908 Barton Parkway Austin, TX 78704	7 Amount (\$) \$18.00
8 Purpose of payment (See instructions regarding type of information required.) Fundraising expenses (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 11/07/2008	Payee name Neely, Mary Ann (Ms.) Payee address; City; State; Zip Code 1908 Barton Parkway Austin, TX 78704	Amount (\$) \$3,000.00
Purpose of payment (See instructions regarding type of information required.) contract labor (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 11/04/2008	Payee name Nelson, Leslie (Ms.) Payee address; City; State; Zip Code 1002 Redd Austin, TX 78745	Amount (\$) \$100.00
Purpose of payment (See instructions regarding type of information required.) Contract labor (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 10/30/2008	Payee name Office Max Payee address; City; State; Zip Code 907 W. 5th St. Austin, TX 78704	Amount (\$) \$151.54
Purpose of payment (See instructions regarding type of information required.) Office supplies (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 9/11 Report: 26/28
2 FILER NAME Huber, Karen (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00232323
4 Date 12/12/2008	5 Payee name Office Max 6 Payee address; City; State; Zip Code 907 W. 5th St. Austin, TX 78704	7 Amount (\$) \$81.68
8 Purpose of payment (See instructions regarding type of information required.) Event supplies (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 11/07/2008	Payee name Ramos, Sandra (Ms.) Payee address; City; State; Zip Code 5201 Oak Valley Dr. Austin, TX 78731	Amount (\$) \$72.17
Purpose of payment (See instructions regarding type of information required.) cell phone (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 10/31/2008	Payee name Ricks Refills Payee address; City; State; Zip Code 6800 West Gate Blvd. # 133 Austin, TX 78745	Amount (\$) \$113.66
Purpose of payment (See instructions regarding type of information required.) Office supplies (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 11/07/2008	Payee name Ricks Refills Payee address; City; State; Zip Code 6800 West Gate Blvd. # 133 Austin, TX 78745	Amount (\$) \$135.31
Purpose of payment (See instructions regarding type of information required.) Office supplies (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 10/11 Report: 27/28
2 FILER NAME Huber, Karen (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00232323
4 Date 10/30/2008	5 Payee name Rindy Miller Media 6 Payee address; City; State; Zip Code 2401 East 6th St. Suite 1003 Austin, TX 78702	7 Amount (\$) \$3,000.00
8 Purpose of payment (See instructions regarding type of information required.) TV ads (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 11/03/2008	Payee name Stanley Garrison & Associates Payee address; City; State; Zip Code 812 San Antonio St. Suite G-23 Austin, TX 78701	Amount (\$) \$1,500.00
Purpose of payment (See instructions regarding type of information required.) consulting (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 12/23/2008	Payee name Star Events, LLC Payee address; City; State; Zip Code 15000 Hamilton Pool Rd. Austin, TX 78738	Amount (\$) \$375.00
Purpose of payment (See instructions regarding type of information required.) Event expenses (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 11/03/2008	Payee name Taco X-press Payee address; City; State; Zip Code 2529 So. Lamar Austin, TX 78704	Amount (\$) \$64.48
Purpose of payment (See instructions regarding type of information required.) Fundraising expenses (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 11/11 Report: 28/28
2 FILER NAME Huber, Karen (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00232323
4 Date 11/03/2008	5 Payee name Travis County Democratic Party 6 Payee address; City; State; Zip Code P. O. Box 684263 Austin, TX 78768-4263	7 Amount (\$) \$1,000.00
8 Purpose of payment (See instructions regarding type of information required.) rent (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 11/04/2008	Payee name Williams, Rebecca (Ms.) Payee address; City; State; Zip Code 2414 Longview #310 Austin, TX 78705	Amount (\$) \$100.00
Purpose of payment (See instructions regarding type of information required.) contract labor (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held: