

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 ACCOUNT# (Ethics Commission filers) 7305	2 Total pages filed: <i>982</i> 26
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI <i>Mr. Herbert E.</i> NICKNAME LAST SUFFIX <i>Herb Evans</i>	OFFICE USE ONLY <hr/> Date Received <hr/> Date Hand-delivered or Date Postmarked <hr/> Receipt # Amount <hr/> Date Processed <hr/> Date Imaged	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <i>1302 West Avenue, Austin, Tx. 78701</i>		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION <i>(512) 472-2733</i>		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI <i>Mr. Joseph A.</i> NICKNAME LAST SUFFIX <i>Joe Turner</i>		
7 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <i>1504 West Avenue, Austin, Tx. 78701</i>		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION <i>(512) 474-4892</i>		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year <i>1 / 22 / 2010 2 / 20 / 2010</i>		
11 ELECTION	ELECTION DATE Month Day Year <i>3 / 2 / 2010</i>	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any) <i>Justice of the Peace, Pct. 5, Travis Co.</i>	13 OFFICE SOUGHT (if known) <i>same</i>	
14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS <input type="checkbox"/> additional pages	** Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ** Name <i>None</i> Address / PO Box; Apt. / Suite #; City; State; Zip Code		

GO TO PAGE 2

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

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

15 C/OH NAME Herbert Evans 16 ACCOUNT # (Ethics Commission Filers)

17 NOTICE FROM POLITICAL COMMITTEE(S)

This box is for notice of political contributions accepted or political expenditures made 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 <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC <input type="checkbox"/> additional pages	COMMITTEE NAME	NONE
	COMMITTEE ADDRESS	
	COMMITTEE CAMPAIGN TREASURER NAME	
	COMMITTEE CAMPAIGN TREASURER ADDRESS	

18 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 1,605.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 14,780.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ - 0 -
	4. TOTAL POLITICAL EXPENDITURES	\$ 1,219.86
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 13,874.91
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 24,902.56

19 AFFIDAVIT

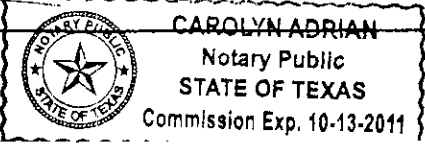
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

[Signature]
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Herbert Evans, this the 22 day of FEB, 2010, to certify which, witness my hand and seal of office.

[Signature] Carolyn Adrian 2/22/10
Signature of officer administering oath Printed 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 Total pages Schedule A:

1 of 15

2 FILER NAME

Herbert Evans

3 ACCOUNT # (Ethics Commission filers)

4 Date

1-22-2010

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

David Grassbough

6 Contributor address; City; State; Zip Code

*316 W. 12th St. #107
Austin, Texas 78701*

7 Amount of contribution (\$)

100.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

Attorney

10 Employer (See Instructions)

Self

Date

1-26-2010

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

Scanlan, Buckle & Young

Contributor address; City; State; Zip Code

*602 W. 11th Street
Austin, Texas 78701*

Amount of contribution (\$)

150.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Attorneys

Employer (See Instructions)

Self

Date

1-27-2010

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

Joseph A. Turner

Contributor address; City; State; Zip Code

*1504 West Ave.
Austin, Texas 78701*

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Self

Date

1-28-2010

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

Philip R. Presse

Contributor address; City; State; Zip Code

*819 1/2 West 11th St.
Austin, Texas 78701*

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Self

Date

1-28-2010

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

George B. Slade

Contributor address; City; State; Zip Code

*2224 Walsh Tarlton Suite 210
Austin, Texas 78746*

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Self

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <i>2 of 15</i>	
2 FILER NAME <i>Herbert Evans</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>1-28-2010</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>D. J. Miliman</i>	7 Amount of contribution (\$) <i>100.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>925 Cavalry Ride Trl Austin, Texas 78732</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <i>Attorney</i>		10 Employer (See Instructions) <i>Self</i>	
Date <i>1-28-2010</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>David Phillips</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>207 E. Milton St. Austin, Texas 78704</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Judge, County Court at Law #1</i>		Employer (See Instructions) <i>Travis County</i>	
Date <i>1-29-2010</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Ed Small</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>100 Congress, Suite 1100 Austin, Texas 78701</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions) <i>Self</i>	
Date <i>1-29-2010</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Nicholas S. Tran</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1609 Ohlen Rd., Ste C Austin, Texas 78758</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions) <i>Self</i>	
Date <i>1-29-2010</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Stephen Fenoglio</i>	Amount of contribution (\$) <i>250.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>508 W. 12th St. Austin, Texas 78701</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions) <i>Self</i>	

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 3 of 15	
2 FILER NAME Herbert Evans		3 ACCOUNT # (Ethics Commission filers)	
4 Date 1-29-2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Chris Gunter & Alan Bennet	7 Amount of contribution (\$) 500.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 600 W. Ninth St. Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) Attorneys		10 Employer (See Instructions) Self	
Date 1-29-2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Philip C. Friday, Jr.	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 700 LAVACA Street, suite 1150 Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self	
Date 1-29-2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Ramiro Lopez & Brad Urrutia	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 801 W. Oltorf St. Austin, Texas 78704		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Attorneys		Employer (See Instructions) Self	
Date 1-29-2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Josh Saegert & Jodi C. Cole	Amount of contribution (\$) 200.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 609 W. 9th St. Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Attorneys		Employer (See Instructions) Self	
Date 1-30-2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Rosemary Cottman	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3305 Northland Dr. Ste 500 Austin, Texas 78731		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self	

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <i>4 of 15</i>	
2 FILER NAME <i>Herbert Evans</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>2-1-2010</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>William C. Bednar</i>	7 Amount of contribution (\$) <i>100.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>203 West 32nd St. Austin, Texas 78705</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <i>Attorney</i>		10 Employer (See Instructions) <i>Self</i>	
Date <i>2-1-2010</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Armbrust & Brown</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>100 Congress Avenue, Suite 1300 Austin, Texas 78701</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions) <i>Self</i>	
Date <i>2-1-2010</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Glen C. Bonnett & Leigh Bonnett</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>812 West 11th St., Suite 201 Austin, Texas 78701</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Attorneys</i>		Employer (See Instructions) <i>Self</i>	
Date <i>2-1-2010</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Barron & Newburger</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1212 Guadalupe, Suite 104 Austin, Texas 78701</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Attorneys</i>		Employer (See Instructions) <i>Self</i>	
Date <i>2-2-2010</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Dan Dworin</i>	Amount of contribution (\$) <i>200.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>700 Lavaca St., Ste 1550 Austin, Texas 78701</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions) <i>Self</i>	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <i>5 of 15</i>	
2 FILER NAME <i>Herbert Evans</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>2-2-2010</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>P. David Wahlberg</i>	7 Amount of contribution (\$) <i>100.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>1208 West Ave. Austin, Texas 78701</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <i>Attorney</i>		10 Employer (See Instructions) <i>Self</i>	
Date <i>2-2-2010</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Stephen B. Edwards</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>806 W. 11th St. Austin, Texas 78701</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions) <i>Self</i>	
Date <i>2-2-2010</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Dawn C. Coronado</i>	Amount of contribution (\$) <i>250.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>5602 Palisade Ct. Austin, Texas 78731</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Mother Extraordinaire</i>		Employer (See Instructions)	
Date <i>2-2-2010</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Shirley D. Arend</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>4423 Crestway Dr. Austin, Texas 78731</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions) <i>Self</i>	
Date <i>2-2-2010</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Eric B. Hartman</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2114 Indian Trail Austin, Texas 78703</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions) <i>Self</i>	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

6 of 15

2 FILER NAME

Herbert Evans

3 ACCOUNT # (Ethics Commission filers)

4 Date

2-2-2010

5 Full name of contributor out-of-state PAC (ID#: _____)

Steve Turro

6 Contributor address; City; State; Zip Code

404 West 13th Street
Austin, Texas 78701

7 Amount of contribution (\$)

100.00

(If travel outside of Texas, complete Schedule T)

8 In-kind contribution description (if applicable)

9 Principal occupation / Job title (See Instructions)

Attorney

10 Employer (See Instructions)

Self

Date

2-2-2010

Full name of contributor out-of-state PAC (ID#: _____)

Scott C. Smith

Contributor address; City; State; Zip Code

1304 Nueces
Austin, Texas 78701

Amount of contribution (\$)

250.00

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Self

Date

2-2-2010

Full name of contributor out-of-state PAC (ID#: _____)

Eva Eakin Wisner

Contributor address; City; State; Zip Code

821 W. 11th Street
Austin, Texas 78701

Amount of contribution (\$)

100.00

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Self

Date

2-2-2010

Full name of contributor out-of-state PAC (ID#: _____)

David A. Sheppard

Contributor address; City; State; Zip Code

700 Lavaca St. Ste 1550
Austin, Texas 78701

Amount of contribution (\$)

500.00

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Self

Date

2-2-2010

Full name of contributor out-of-state PAC (ID#: _____)

James O. Burke

Contributor address; City; State; Zip Code

18410 FM 969
Manor, Texas 78653

Amount of contribution (\$)

100.00

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Self

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

7 of 15

2 FILER NAME

Herbert Evans

3 ACCOUNT # (Ethics Commission filers)

4 Date

2-2-2010

5 Full name of contributor out-of-state PAC (ID#: _____)

Clsie F. Craven

6 Contributor address; City; State; Zip Code

1112 Cripple Creek Dr.
Austin, Texas 78758

7 Amount of contribution (\$)

100.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

Attorney

10 Employer (See Instructions)

Self

Date

2-2-2010

Full name of contributor out-of-state PAC (ID#: _____)

Francis Williams Montenegro

Contributor address; City; State; Zip Code

1604 San Antonio St.
Austin, Texas 78701

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Self

Date

2-2-2010

Full name of contributor out-of-state PAC (ID#: _____)

Ruby A. Felan

Contributor address; City; State; Zip Code

1748 Ohlen Rd
Austin, Texas 78757

Amount of contribution (\$)

60.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Clerk

Employer (See Instructions)

TRAVIS COUNTY

Date

2-2-2010

Full name of contributor out-of-state PAC (ID#: _____)

Nick Duncan

Contributor address; City; State; Zip Code

2135 Barton Hills
Austin, Texas 78704

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Self

Date

2-2-2010

Full name of contributor out-of-state PAC (ID#: _____)

Alberto Garcia

Contributor address; City; State; Zip Code

1715 S. 1st St.
Austin, Texas 78704

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Self

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <i>8 of 15</i>	
2 FILER NAME <i>Herbert Evans</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>2-2-2010</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Minton, Burton, Foster & Collins</i>	7 Amount of contribution (\$) <i>1,000.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>1100 Guadalupe St. Austin, Texas 78701</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <i>Attorneys</i>		10 Employer (See Instructions) <i>Self</i>	
Date <i>2-2-2010</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Lynn Sanders</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>919 Congress Ave, Suite 450 Austin, Texas 78701</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions) <i>Self</i>	
Date <i>2-2-2010</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Karen M. Sonleitner</i>	Amount of contribution (\$) <i>500.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1712 Pasadena Dr. Austin, Texas 78757</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Auditor</i>		Employer (See Instructions) <i>Travis County</i>	
Date <i>2-2-2010</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Aaron Mueller</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>605 W. 10th St. Austin, Texas 78701</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions) <i>Self</i>	
Date <i>2-2-2010</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Andy Casey & Sara Casey</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>8705 Shoal Creek Blvd, Suite 202 Austin, Texas 78757</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Attorneys</i>		Employer (See Instructions) <i>Self</i>	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 9 of 15	
2 FILER NAME Herbert Evans		3 ACCOUNT # (Ethics Commission filers)	
4 Date 2-2-2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Robert Notzon	7 Amount of contribution (\$) 100.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 509 W. 16th St. Austin, Texas 78201		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) Attorney		10 Employer (See Instructions) self	
Date 2-2-2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) John H. Lipscombe	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 6600 mesa Dr. Austin, Texas 78731		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) self	
Date 2-2-2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Charlie Baird	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P.O. Box 1242 Austin, Texas 78767		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) District Judge		Employer (See Instructions) Travis County	
Date 2-2-2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mary Kay Sicola	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 7076 West Lynn St. Austin, Texas 78703		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Texas Legal Aid	
Date 2-2-2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Robert Zenhauer-Ramirez	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1103 Nueces St. Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) self	

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

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:
10 of 15

2 FILER NAME
Herbert Evans

3 ACCOUNT # (Ethics Commission filers)

4 Date
2-2-2010

5 Full name of contributor out-of-state PAC (ID#: _____)
Franklin Scott Spears, Jr.

7 Amount of contribution (\$)
100.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
*901 S. MoPac Expwy
Austin, Texas 78746*

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)
Attorney

10 Employer (See Instructions)
self

Date
2-2-2010

Full name of contributor out-of-state PAC (ID#: _____)
David L. Botsford

Amount of contribution (\$)
250.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
*1307 West Avenue
Austin, Texas 78701*

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
self

Date
2-2-2010

Full name of contributor out-of-state PAC (ID#: _____)
Jamie Spencer

Amount of contribution (\$)
100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
*812 San Antonio St., Suite 403
Austin, Texas 78701*

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
self

Date
2-2-2010

Full name of contributor out-of-state PAC (ID#: _____)
Bobby R. Taylor

Amount of contribution (\$)
250.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
*1709 East Martin Luther King Jr. Blvd
Austin, Texas 78702*

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
self

Date
2-2-2010

Full name of contributor out-of-state PAC (ID#: _____)
Polk Shelton

Amount of contribution (\$)
150.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
*600 Little Oak Dr.
Austin, Texas 78753*

*musician
performance at
2-2-10 Fundraiser*

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
self

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

11 of 15

2 FILER NAME

Herbert Evans

3 ACCOUNT # (Ethics Commission filers)

4 Date

2-2-2010

5 Full name of contributor out-of-state PAC (ID#: _____)

Dan Ross dba Allan House

6 Contributor address; City; State; Zip Code

1104 San Antonio
Austin, Texas 78701

7 Amount of contribution (\$)

1,340.00

8 In-kind contribution description (if applicable)

Use of Allan House
for 2-2-10
Fundraiser

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

Attorney

10 Employer (See Instructions)

Self

Date

2-3-2010

Full name of contributor out-of-state PAC (ID#: _____)

Wade H. Russell

Contributor address; City; State; Zip Code

404 W. 13th St.
Austin, Texas 78701

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Self

Date

2-3-2010

Full name of contributor out-of-state PAC (ID#: _____)

John W. Pleuthner

Contributor address; City; State; Zip Code

3508 Far West Blvd., Suite 190
Austin, Texas 78731

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Self

Date

2-4-2010

Full name of contributor out-of-state PAC (ID#: _____)

Sharlann M. Roe

Contributor address; City; State; Zip Code

808 W. 11th Street
Austin, Texas 78701

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Self

Date

2-4-2010

Full name of contributor out-of-state PAC (ID#: _____)

J. Terry Weeks

Contributor address; City; State; Zip Code

1607 Nueces St.
Austin, Texas 78701

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Self

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

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

12 of 15

2 FILER NAME

Herbert Evans

3 ACCOUNT # (Ethics Commission filers)

4 Date

2-4-2010

5 Full name of contributor out-of-state PAC (ID#: _____)

Gregory Hitt

6 Contributor address; City; State; Zip Code

812 San Antonio St. Ste 100
Austin, Texas 78701

7 Amount of contribution (\$)

100.00

8 in-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

Attorney

10 Employer (See Instructions)

self

Date

2-4-2010

Full name of contributor out-of-state PAC (ID#: _____)

Tuy Nhi Morel

Contributor address; City; State; Zip Code

3508 For West Blvd. Ste. #115
Austin, Tx. 78731

Amount of contribution (\$)

100.00

in-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

self

Date

2-5-2010

Full name of contributor out-of-state PAC (ID#: _____)

Lloyd Doggett

Contributor address; City; State; Zip Code

P.O. Box 5843
Austin, Tx 78763

Amount of contribution (\$)

200.00

in-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

U.S. Congress Representative, Congressional District 25

Employer (See Instructions)

United States Federal Government

Date

2-6-2010

Full name of contributor out-of-state PAC (ID#: _____)

Charles Herring Jr. & Virginia Agnew

Contributor address; City; State; Zip Code

1204 Castle Hill St.
Austin, Tx. 78703

Amount of contribution (\$)

100.00

in-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Attorneys

Employer (See Instructions)

self

Date

2-8-2010

Full name of contributor out-of-state PAC (ID#: _____)

Andrew J. Forsythe

Contributor address; City; State; Zip Code

3200 Crosswind Dr.
Sprucewood, Tx. 78669

Amount of contribution (\$)

100.00

in-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

self

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

13 of 15

2 FILER NAME

Herbert Evans

3 ACCOUNT # (Ethics Commission filers)

4 Date

2-8-2010

5 Full name of contributor out-of-state PAC (ID#: _____)

Richard Hoffman

6 Contributor address; City; State; Zip Code

611 J. Congress # 210
Austin, Tx. 78704

7 Amount of contribution (\$)

100.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

Attorney

10 Employer (See Instructions)

self

Date

2-8-2010

Full name of contributor out-of-state PAC (ID#: _____)

David M. Gottfried

Contributor address; City; State; Zip Code

1505 West Sixth St.
Austin, Texas 78703

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

self

Date

2-10-2010

Full name of contributor out-of-state PAC (ID#: _____)

Ann M. Denkler

Contributor address; City; State; Zip Code

6112 Highlandale Dr.
Austin, Texas 78731

Amount of contribution (\$)

75.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Administrative Assistant

Employer (See Instructions)

TRAVIS County

Date

2-10-2010

Full name of contributor out-of-state PAC (ID#: _____)

Bennie E. Ray

Contributor address; City; State; Zip Code

710 W. 14th St. Suite C
Austin, Texas 78701

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

self

Date

2-10-2010

Full name of contributor out-of-state PAC (ID#: _____)

Bruce Fox

Contributor address; City; State; Zip Code

404 W. 13th Street
Austin, Texas 78701

Amount of contribution (\$)

200.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

self

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

14 of 15

2 FILER NAME

Herbert Evans

3 ACCOUNT # (Ethics Commission filers)

4 Date

2-10-2010

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

Craig Davis

6 Contributor address; City; State; Zip Code

919 Congress Ave # 450

Austin, Texas 78701

7 Amount of contribution (\$)

400.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

Attorney

10 Employer (See Instructions)

self

Date

2-12-2010

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

Betty Blackwell

Contributor address; City; State; Zip Code

1306 Nucces St.

Austin, Texas 78701

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

self

Date

2-15-2010

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

David Reynolds

Contributor address; City; State; Zip Code

1012 Rio Grande

Austin, Texas 78701

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

self

Date

2-16-2010

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

Sandra Ritz

Contributor address; City; State; Zip Code

902 Rio Grande

Austin, Texas 78701

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

self

Date

2-16-2010

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

Malcom Smith

Contributor address; City; State; Zip Code

808 W. 11th

Austin, Texas 78701

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

self

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

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

15 of 15

2 FILER NAME

Herbert Evans

3 ACCOUNT # (Ethics Commission filers)

4 Date

2-16-2010

5 Full name of contributor out-of-state PAC (ID#: _____)

Arthur Trolle

6 Contributor address; City; State; Zip Code

700 E. 11th St. #103

Austin, Texas 78701

7 Amount of contribution (\$)

100.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

Attorney

10 Employer (See Instructions)

self

Date

2-19-2010

Full name of contributor out-of-state PAC (ID#: _____)

Jody Sims

Contributor address; City; State; Zip Code

812 San Antonio #103

Austin, Texas 78701

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

self

Date

Full name of contributor out-of-state PAC (ID#: _____)

Contributor address; City; State; Zip Code

Amount of contribution (\$)

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#: _____)

Contributor address; City; State; Zip Code

Amount of contribution (\$)

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#: _____)

Contributor address; City; State; Zip Code

Amount of contribution (\$)

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

PLEGGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.		1 Total pages this Schedule B: 1	
2 FILER NAME Herbert Evans		3 ACCOUNT # (Ethics Commission filers)	
4 TOTAL OF UNITEMIZED PLEDGES: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨			\$
5 Date 1-22-2010	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Polk Shelton	8 Amount of pledge (\$) 150.00	9 In-kind description (if applicable) musician performance at 2-2-2010 Fundraiser
7 Pledgor address; City; State; Zip Code 600 Little Oak Dr. Austin, Texas 78753		(If travel outside of Texas, complete Schedule T)	
10 Principal occupation / Job title (See Instructions) Attorney		11 Employer (See Instructions) Self	
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pledgor address; City; State; Zip Code	Amount of pledge (\$)	In-kind description (if applicable)
(If travel outside of Texas, complete Schedule T)			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pledgor address; City; State; Zip Code	Amount of pledge (\$)	In-kind description (if applicable)
(If travel outside of Texas, complete Schedule T)			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pledgor address; City; State; Zip Code	Amount of pledge (\$)	In-kind description (if applicable)
(If travel outside of Texas, complete Schedule T)			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pledgor address; City; State; Zip Code	Amount of pledge (\$)	In-kind description (if applicable)
(If travel outside of Texas, complete Schedule T)			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: <i>1 of 2</i>
2 FILER NAME <i>Herbert Evans</i>		3 ACCOUNT # (Ethics Commission filers)
4 TOTAL OF UNITEMIZED LOANS: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨ \$ <i>0</i>		
5 Date of loan <i>1-29-2010</i>	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Herbert Evans (self)</i>	9 Loan Amount (\$) <i>122.66</i>
6 Is lender a financial institution? <i>Y</i> <input checked="" type="radio"/> <i>(N)</i>	8 Lender address; City; State; Zip Code <i>1302 West Avenue Austin, Texas 78701</i>	10 Interest rate <i>N/A</i>
11 Maturity date <i>N/A</i>		
12 Principal occupation / Job title (See Instructions) <i>Self (Justice of the Peace, Pct. 5)</i>		13 Employer (See Instructions) <i>Travis County</i>
14 Description of Collateral <input checked="" type="checkbox"/> none <i>This expenditure for wine for 2-2-2010 Fundraiser</i>		
15 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	16 Name of guarantor <i>N/A</i>	18 Amount Guaranteed (\$)
17 Guarantor address; City; State; Zip Code		
19 Principal Occupation		20 Employer
Date of loan <i>1-31-2010</i>	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Herbert Evans (self)</i>	Loan Amount (\$) <i>54.08</i>
Is lender a financial institution? <i>Y</i> <input checked="" type="radio"/> <i>(N)</i>	Lender address; City; State; Zip Code <i>1302 West Avenue Austin, Texas 78701</i>	Interest rate <i>N/A</i>
Principal occupation / Job title (See Instructions) <i>Self (Justice of the Peace, Pct. 5)</i>		Employer (See Instructions) <i>Travis County</i>
Description of Collateral <input checked="" type="checkbox"/> none <i>This expenditure for soft drinks for 2-2-2010 Fundraiser</i>		
GUARANTOR INFORMATION <input type="checkbox"/> not applicable	Name of guarantor <i>N/A</i>	Amount Guaranteed (\$)
Guarantor address; City; State; Zip Code		
Principal Occupation		Employer
<p>ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED</p> <p>If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: <i>2 of 2</i>
2 FILER NAME <i>Herbert Evans</i>		3 ACCOUNT # (Ethics Commission filers)
4 TOTAL OF UNITEMIZED LOANS: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨ \$		
5 Date of loan <i>2-2-10</i>	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Herbert Evans (self)</i>	9 Loan Amount (\$) <i>824.82</i>
6 Is lender a financial Institution? Y <input checked="" type="radio"/> N	8 Lender address; City; State; Zip Code <i>1302 West Avenue Austin, Texas 78701</i>	10 Interest rate <i>N/A</i>
12 Principal occupation / Job title (See Instructions) <i>Self (Justice of the Peace, Pct. 5)</i>		13 Employer (See Instructions) <i>TRAVIS County</i>
14 Description of Collateral <input checked="" type="checkbox"/> none <i>This expenditure for food for 2-2-2010 Fundraiser</i>		
15 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	16 Name of guarantor <i>N/A</i>	18 Amount Guaranteed (\$)
17 Guarantor address; City; State; Zip Code		
19 Principal Occupation		20 Employer
Date of loan	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	Loan Amount (\$)
Is lender a financial Institution? Y N	Lender address; City; State; Zip Code	Interest rate
Principal occupation / Job title (See Instructions)		Maturity date
Employer (See Instructions)		
Description of Collateral <input type="checkbox"/> none		
GUARANTOR INFORMATION <input type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
Guarantor address; City; State; Zip Code		
Principal Occupation		Employer

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

POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form. 1 Total pages Schedule F:
1 of 2

2 FILER NAME *Herbert Evans* 3 ACCOUNT # (Ethics Commission filers)

4 Date <i>1-26-2010</i>	5 Payee name <i>Hill Country Events, LTD.</i>	7 Amount (\$) <i>\$ 163.30</i>
	6 Payee address; City; State; Zip Code <i>1000 Cashew Lane Cedar Park, Texas 78613</i>	

8 Purpose of payment (See instructions regarding type of information required.) <i>Beverage Service for 2/2/2010 Fundraiser</i> <small>(If travel outside of Texas, complete Schedule T)</small>	9 <small>** Complete if direct expenditure to benefit C/OH **</small> Candidate / Officeholder name Office sought Office held
--	--

Date <i>1-29-2010</i>	Payee name <i>Whole Foods Market</i>	Amount (\$) <i>\$ 122.66</i>
	Payee address; City; State; Zip Code <i>525 N. Lamar Austin, Texas 78703</i>	

Purpose of payment (See instructions regarding type of information required.) <i>Wine for 2/2/2010 Fundraiser</i> <small>(If travel outside of Texas, complete Schedule T)</small>	9 <small>** Complete if direct expenditure to benefit C/OH **</small> Candidate / Officeholder name Office sought Office held
--	--

Date <i>1-31-2010</i>	Payee name <i>Randall's</i>	Amount (\$) <i>\$ 54.08</i>
	Payee address; City; State; Zip Code <i>715 Exposition Blvd Austin, Texas 78703</i>	

Purpose of payment (See instructions regarding type of information required.) <i>Soft Drinks for 2/2/2010 Fundraiser</i> <small>(If travel outside of Texas, complete Schedule T)</small>	9 <small>** Complete if direct expenditure to benefit C/OH **</small> Candidate / Officeholder name Office sought Office held
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Date <i>2-1-2010</i>	Payee name <i>Austin Womens Political Caucus</i>	Amount (\$) <i>\$ 65.00</i>
	Payee address; City; State; Zip Code <i>P.O. Box 12383 Austin, Texas 78711</i>	

Purpose of payment (See instructions regarding type of information required.) <i>DUES</i> <small>(If travel outside of Texas, complete Schedule T)</small>	9 <small>** Complete if direct expenditure to benefit C/OH **</small> 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 Total pages Schedule F:
2 of 2

2 FILER NAME *Herbert Evans* 3 ACCOUNT # (Ethics Commission filers)

4 Date <i>2-1-2010</i>	5 Payee name <i>Abuelo's Mexican Food Embassy</i>	7 Amount (\$) <i>\$ 824.82</i>
6 Payee address; City; State; Zip Code <i>2901 S. Capital of Texas Hwy Austin, Texas 78746</i>		

8 Purpose of payment (See instructions regarding type of information required.) <i>Food for 2/2/2010 Fundraiser</i> <small>(If travel outside of Texas, complete Schedule T)</small>	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
--	--

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

Purpose of payment (See instructions regarding type of information required.) <small>(If travel outside of Texas, complete Schedule T)</small>	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
---	--

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

Purpose of payment (See instructions regarding type of information required.) <small>(If travel outside of Texas, complete Schedule T)</small>	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
---	--

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

Purpose of payment (See instructions regarding type of information required.) <small>(If travel outside of Texas, complete Schedule T)</small>	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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**POLITICAL EXPENDITURES
MADE FROM PERSONAL FUNDS**

SCHEDULE G

The Instruction Guide explains how to complete this form.	1 Total pages Schedule G: <i>1</i>
2 FILER NAME <i>Herbert Evans</i>	3 ACCOUNT # (Ethics Commission filers)

4 Date <i>1-29-2010</i>	5 Payee name <i>Whole Foods Market</i>	8 Amount (\$) <i>122.66</i>
	6 Payee address; City; State; Zip Code <i>525 N. Lamar Austin, Texas 78703</i>	
	7 Purpose of expenditure (See instructions regarding type of information required.) <i>Wine for 2/2/2010 Fundraiser</i> (If travel outside of Texas, complete Schedule T)	<input checked="" type="checkbox"/> Reimbursement from political contributions intended

Date <i>1-31-2010</i>	Payee name <i>Randall's</i>	Amount (\$) <i>54.08</i>
	Payee address; City; State; Zip Code <i>715 Exposition Blvd Austin, Texas 78703</i>	
	Purpose of expenditure (See instructions regarding type of information required.) <i>Soft drinks for 2/2/2010 Fundraiser</i> (If travel outside of Texas, complete Schedule T)	<input checked="" type="checkbox"/> Reimbursement from political contributions intended

Date <i>2-1-2010</i>	Payee name <i>Abuelo's Mexican Food Embassy</i>	Amount (\$) <i>824.82</i>
	Payee address; City; State; Zip Code <i>2901 S. Capital Texas Hwy Austin, Texas 78746</i>	
	Purpose of expenditure (See instructions regarding type of information required.) <i>Food for 2/2/2010 Fundraiser</i> (If travel outside of Texas, complete Schedule T)	<input checked="" type="checkbox"/> Reimbursement from political contributions intended

Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	
	Purpose of expenditure (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	<input type="checkbox"/> Reimbursement from political contributions intended

Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	
	Purpose of expenditure (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	<input type="checkbox"/> Reimbursement from political contributions intended

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PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

SCHEDULE H

The Instruction Guide explains how to complete this form. 1 Total pages Schedule H: 1

2 FILER NAME HERBERT EVANS 3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Business name <u>NONE</u>	7 Amount (\$)
6 Business address: City: State: Zip Code		

8 Purpose of payment (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date	Business name	Amount (\$)
Business address: City: State: Zip Code		

Purpose of payment (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date	Business name	Amount (\$)
Business address: City: State: Zip Code		

Purpose of payment (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date	Business name	Amount (\$)
Business address: City: State: Zip Code		

Purpose of payment (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: 1

2 FILER NAME

HERBERT EVANS

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name 6 Payee address; City; State; Zip Code	8 Amount (\$)
	<p><u>NONE</u></p> <p>7 Purpose of expenditure (See instructions regarding type of information required.)</p>	
	<p>Payee name</p> <p>Payee address; City; State; Zip Code</p> <p>Purpose of expenditure (See instructions regarding type of information required.)</p>	Amount (\$)
	<p>Payee name</p> <p>Payee address; City; State; Zip Code</p> <p>Purpose of expenditure (See instructions regarding type of information required.)</p>	Amount (\$)
	<p>Payee name</p> <p>Payee address; City; State; Zip Code</p> <p>Purpose of expenditure (See instructions regarding type of information required.)</p>	Amount (\$)
	<p>Payee name</p> <p>Payee address; City; State; Zip Code</p> <p>Purpose of expenditure (See instructions regarding type of information required.)</p>	Amount (\$)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

**IN-KIND CONTRIBUTION OR POLITICAL EXPENDITURE
FOR TRAVEL OUTSIDE OF TEXAS**

SCHEDULE T

The Instruction Guide explains how to complete this form. 1 Total pages Schedule T: 1

2 FILER NAME HERIBERT EUMS 3 ACCOUNT # (Ethics Commission filers)

4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee
NONE

5 Contribution / Expenditure reported on:
 Schedule A Schedule B Schedule C Schedule D Schedule F Schedule G
 Schedule H Schedule N COH-UC COH-T PAC-C PAC-E

6 Dates of travel	7 Name of person(s) traveling
	8 Departure city or name of departure location
	9 Destination city or name of destination location

10 Means of transportation	11 Purpose of travel (including name of conference, seminar, or other event)
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Name of Contributor / Corporation or Labor Organization / Pledgor / Payee

Contribution / Expenditure reported on:
 Schedule A Schedule B Schedule C Schedule D Schedule F Schedule G
 Schedule H Schedule N COH-UC COH-T PAC-C PAC-E

Dates of travel	Name of person(s) traveling
	Departure city or name of departure location
	Destination city or name of destination location

Means of transportation	Purpose of travel (including name of conference, seminar, or other event)
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Name of Contributor / Corporation or Labor Organization / Pledgor / Payee

Contribution / Expenditure reported on:
 Schedule A Schedule B Schedule C Schedule D Schedule F Schedule G
 Schedule H Schedule N COH-UC COH-T PAC-C PAC-E

Dates of travel	Name of person(s) traveling
	Departure city or name of departure location
	Destination city or name of destination location

Means of transportation	Purpose of travel (including name of conference, seminar, or other event)
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