

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

7312

**FORM C/OH
COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers)	2 Total pages filed: <div style="font-size: 2em; text-align: center;">40</div>
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <input checked="" type="checkbox"/> FIRST MI Raul R NICKNAME LAST SUFFIX Alvarez		OFFICE USE ONLY Date Received Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2601 Zaragoza St. Austin, TX 78702		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 899-3876		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR <input checked="" type="checkbox"/> FIRST MI Blanca NICKNAME LAST SUFFIX Garcia		
7 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1715 S. 1st, Austin, TX 78704		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 916-0464		
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 2 / 1 / 2010 2 / 21 / 2010		
11 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special 3 / 2 / 2010		
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) Travis County Commissioner - Pct. 4	
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 Address / PO Box; Apt. / Suite #; City; State; Zip Code		

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

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

15 C/OH NAME Raul Alvarez 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
	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	\$ 337.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 13652.81
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 14771.33
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 8708.86
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 3000.00

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.



Raul Alvarez
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Raul Alvarez, this the twenty-second day of February, 20 10, to certify which, witness my hand and seal of office.

Cynthia H Flint Cynthia H Flint Notary Public
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: <i>1 of 21</i>	
2 FILER NAME <i>Paul Alvarez</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>2/2/10</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Fred McGhee</i>	7 Amount of contribution (\$) <i>100.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>2316 Thrasher Ln., 78711 Austin, TX</i>		(If travel outside of Texas, complete Schedule T)	

9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
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Date <i>2/4/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Michael Kellerman</i>	Amount of contribution (\$) <i>25.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1601 Miriam Avenue #118 Austin, TX 78702</i>		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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Date <i>2/5/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Paul Garza</i>	Amount of contribution (\$) <i>750.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>5710 Jeff Davis Ave., 78756 Austin, TX</i>		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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Date <i>2/8/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Linda Welsh</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>11205 Terrace Bluff Dr. Austin, TX 78754</i>		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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Date <i>2/8/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Frances Jones</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1801 Lavaca St. Austin, TX 78701</i>		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form. **1** Total pages Schedule A: 2 of 21

2 FILER NAME: Paul Alvarez **3** ACCOUNT # (Ethics Commission filers)

4 Date: 2/8/10 **5** Full name of contributor: Stacy Guidry out-of-state PAC (ID#:) **7** Amount of contribution (\$): 25.00 **8** In-kind contribution description (if applicable):
6 Contributor address; City; State; Zip Code: 4802 Turnstone Dr, Austin, TX 78744
(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions) **10** Employer (See Instructions)

Date: 2/9/10 Full name of contributor: Rosalia Castanedo out-of-state PAC (ID#:) Amount of contribution (\$): 50.00 In-kind contribution description (if applicable):
Contributor address; City; State; Zip Code: 3505 Kellywood, Austin, TX 78739
(If travel outside of Texas, complete Schedule T)

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

Date: 2/10/10 Full name of contributor: David Braun out-of-state PAC (ID#:) Amount of contribution (\$): 100.00 In-kind contribution description (if applicable):
Contributor address; City; State; Zip Code: 324 Ernes School Road, Austin, TX 78746
(If travel outside of Texas, complete Schedule T)

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

Date: 2/11/10 Full name of contributor: Toni Dwan out-of-state PAC (ID#:) Amount of contribution (\$): 250.00 In-kind contribution description (if applicable):
Contributor address; City; State; Zip Code: 2012 E. 7th St, Austin, TX 78702
(If travel outside of Texas, complete Schedule T)

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

Date: 2/11/10 Full name of contributor: Jesus Solis out-of-state PAC (ID#:) Amount of contribution (\$): 150.00 In-kind contribution description (if applicable):
Contributor address; City; State; Zip Code: 2916 Mi Ranchito, Rio Grande, TX 78582
(If travel outside of Texas, complete Schedule T)

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

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>3 of 21</i>	
2 FILER NAME <i>Raul Alvarez</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>2/12/10</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Diana Seidel</i>	7 Amount of contribution (\$) <i>30.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>709 Fletcher St., 78704</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>2/13/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Melanie Sherwood</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1700 Newring Ave., 78704</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2/13/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Daniel Houston</i>	Amount of contribution (\$) <i>50.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>4302 Avenue D., 78751</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2/15/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Kathy Bolner</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>216 Neville Wood Ct., 78738</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2/17/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Fred McGhee</i>	Amount of contribution (\$) <i>50.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2316 Thrasher Ln., 78741</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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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 21</i>	
2 FILER NAME <i>Rosa Alvarez</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>2/17/10</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>William Blome</i>	7 Amount of contribution (\$) <i>25.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>1405 Waller St. 78702</i>		(If travel outside of Texas, complete Schedule T)	

9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
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Date <i>2/18/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Myron Hess</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1705 Margaret St. 78704</i>		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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Date <i>2/18/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Kathryn Tova</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>809 W. 32nd St., 78705</i>		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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Date <i>2/17/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Pierla Cavazos</i>	Amount of contribution (\$) <i>25.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>Po Box 1107, 78767</i>		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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Date <i>2/19</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Wayne Gronquist</i>	Amount of contribution (\$) <i>25.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1104 Nveces St. 78701</i>		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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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 21</i>	
2 FILER NAME <i>Raul Alvarez</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>2/4/10</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Olivia Juarez</i>	7 Amount of contribution (\$) <i>65.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>PO Box 213 Lockhart, TX 78644</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>2/17/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Jefferson E. Boyt</i>	Amount of contribution (\$) <i>50.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>5423 Shoalwood Ave. Austin, TX 78756</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2/9/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Lilia Raquel D. Rosas</i>	Amount of contribution (\$) <i>25.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1912 Lightsey Apt. 2, 78704 Austin, TX</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2/7/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Marion Sanchez-Lopez</i>	Amount of contribution (\$) <i>30.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>5934 Republic of Texas Blvd. Austin, TX 78735</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2/17/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Luke Metzger</i>	Amount of contribution (\$) <i>25.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2508 E. 8th St., 78702 Austin, TX</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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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>6 of 21</i>	
2 FILER NAME <i>Raul Alvarez</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>2/16/10</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Robin Schneider</i>	7 Amount of contribution (\$) <i>100.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>2609 Sherwood Ln., 78704 Austin, TX</i>		(If travel outside of Texas, complete Schedule T)	

9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
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Date <i>2/15/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Tony DeLeon</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1101 W. Annie St., 78701 Austin, TX</i>		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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Date <i>2/17/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Rick R. Regra</i>	Amount of contribution (\$) <i>50.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>10407 La Costa Dr., 78747 Austin, TX</i>		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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Date <i>2/17/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>E. Holderness</i>	Amount of contribution (\$) <i>50.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2943 Thousand Oaks Dr., 78746 Austin, TX</i>		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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Date <i>2/9/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Linda S. Johnston</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1101 E. 9th St., 78702 Austin, TX</i>		(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.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <i>7 of 21</i>	
2 FILER NAME <i>Raul Alvarez</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>2/12/10</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Robert Loers</i>	7 Amount of contribution (\$) <i>500.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>4607 S. Forest Dr. 78745 Austin, TX</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>2/17/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Janet Swaffar</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>906 W. 17th St. 78701 Austin, TX</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2/17/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Phillip Schmandt</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>11 Idyll Cir. 78746 Austin, TX</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2/13/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Rodolfo Alariza</i>	Amount of contribution (\$) <i>500.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1221 W. Ben White Blvd. 78704 Austin, TX</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2/16/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>R. Mendocero</i>	Amount of contribution (\$) <i>250.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>512 E. 11th St. 78701 Austin, TX</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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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 21</i>	
2 FILER NAME <i>Raul Alvarez</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>2/12/10</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Raul Poso</i>	7 Amount of contribution (\$) <i>25.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>905 Shady Ln. Austin, TX 78702</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	

Date <i>2/12/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>T.V. Dwyer</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>444 Country Oaks Dr., Buda, TX 78610</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

Date <i>2/11/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Juan Mera</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2300 E. Cesar Chavez, Austin, TX 78702</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

Date <i>2/14/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Josephine Guzman</i>	Amount of contribution (\$) <i>10.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1122 1/2 Gunter St., Austin, TX 78702</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

Date <i>2/14/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Crystal Angel Viegas</i>	Amount of contribution (\$) <i>50.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>603 Allen St. Austin, TX 78702</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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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>9 of 21</i>	
2 FILER NAME <i>Paul Alvarez</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>2/12/10</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Jorge D. Guerra</i>	7 Amount of contribution (\$) <i>50.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>900 Linden St., 78702 Austin, TX</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>2/12/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Javier Hurtado</i>	Amount of contribution (\$) <i>50.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>13413 Kinder Pass 78727 Austin, TX</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2/12/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Rene Reyes</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1403 Garden St., 78702 Austin, TX</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2/12/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Rudy Mendez</i>	Amount of contribution (\$) <i>20.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>314 Garwood St., 78702 Austin, TX</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2/11/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Geoffrey Phips</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2000 Kenwood, 78704 Austin, TX</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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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>10 of 21</i>	
2 FILER NAME <i>Paul Alvarez</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>2/9/10</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Carlos Esteves</i>	7 Amount of contribution (\$) <i>250.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>7701 Lybourn Dr., 78739</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>2/1/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Frank Lam</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>508 W. 16th St., 78701</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2/2/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Michael White</i>	Amount of contribution (\$) <i>500.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>3005 Blue Sky, 78665</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2/2/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Kenneth Manning</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2407 W. 10th St., 78703</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2/2/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Randy Moreno</i>	Amount of contribution (\$) <i>500.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2210 S. 3rd St., 78704</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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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>11 of 21</i>	
2 FILER NAME <i>Raul Alvarez</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>2/11/10</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Alicia Perez</i>	7 Amount of contribution (\$) <i>100.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>1715 Palma Plaza, Austin, TX 78703</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>2/13/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Marcos & Navarrete</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1007 E. 7th St.</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2/21/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Arelia Lopez Phelps</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1511 D. Camp Craft Road Austin, TX 78746</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2/21/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Lara Wendler</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>9201 Camarillo D. Austin, TX 78746</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2/1/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Ben Ramirez III</i>	Amount of contribution (\$) <i>50.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2900 Sunridge Dr. #820, Austin, TX 78711</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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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>12 of 21</i>	
2 FILER NAME <i>Rep Alvarez</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>2/7/10</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Kelly Hagan</i>	7 Amount of contribution (\$) <i>200.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>1700 Baldwin Ave, Austin, TX 78704</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>2/15/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Marjorie A. Ferrell</i>	Amount of contribution (\$) <i>75.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>6407 Ewald St. Austin, TX 78745</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2/16/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Nan Standish Blake</i>	Amount of contribution (\$) <i>20.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2408 War Rd. Austin, TX 78741</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2/16/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Lorelei Brown</i>	Amount of contribution (\$) <i>50.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1014 Spence St. Austin, TX 78702</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2/16/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Marta E. Duffer</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>201 Linden St. Austin, TX 78702</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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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:

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2 FILER NAME

Raul Alvarez

3 ACCOUNT # (Ethics Commission filers)

4 Date

2/17/10

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

Villegas, y. Villegas

6 Contributor address; City; State; Zip Code

1304 E. 6th St. 1. 78702 Austin, TX

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)

10 Employer (See Instructions)

Date

2/19/10

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

Virgil Alexander

Contributor address; City; State; Zip Code

PO Box 5217 Austin, TX 78763

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)

Employer (See Instructions)

Date

2/16/10

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

Ted Meling Raab

Contributor address; City; State; Zip Code

2606 Regan Ave. Austin, TX 78757

Amount of contribution (\$)

72.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/19/10

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

William James Wilson

Contributor address; City; State; Zip Code

5701 S. Mopac Expwy #1917 Austin, TX 78749

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/19/10

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

Bryan M. Hale

Contributor address; City; State; Zip Code

1300 Windsor Rd. Austin, TX 78703

Amount of contribution (\$)

50.00

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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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:
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2 FILER NAME
Paul Alvarez

3 ACCOUNT # (Ethics Commission filers)

4 Date
2/9/10

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

7 Amount of contribution (\$) 100.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
Austin, TX
10463 Sprinkled Rd. 78754

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date
2/9/10

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

Amount of contribution (\$) 100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
Alicante, TX 78660
3409 Trickling Springs Way,

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
2/1/10

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

Amount of contribution (\$) 100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
Austin, TX
PO Box 90485 78709

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
2/11/10

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

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
Austin, TX
2100 Southern Oaks, 78745

258.81
FOOD

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
2/9/10

Full name of contributor out-of-state PAC (ID#: _____)
Deborah G. Ingersoll

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
Austin, TX
111 Congress Ave. St. 500, 78701

250.00
MAILING

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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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>15 of 21</i>	
2 FILER NAME <i>Raul Alvarez</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>2/18/10</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Adrian Gonzalez</i>	7 Amount of contribution (\$) <i>100.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>4700 Pawter Ln., Austin, TX 78744</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>2/19/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Ben Turner</i>	Amount of contribution (\$) <i>500.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1706 Graywood Cove, Austin, TX 78704</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2/19/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>John & Ofelia Carrizales</i>	Amount of contribution (\$) <i>50.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2765 Lyons Rd., Austin, TX 78702</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2/19/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Ryan Runkle</i>	Amount of contribution (\$) <i>1000.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>4705 Frontier Tr., Austin, TX 78745</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2/20/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Jonathan Beall</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2503 Flora Cove, Austin, TX 78757</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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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>16 of 21</i>	
2 FILER NAME <i>Raul Alvarez</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>2/20/10</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Sage White</i>	7 Amount of contribution (\$) <i>100.⁰⁰</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>1904 Kenwood Ave. 78704 Austin, TX</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>2/20/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Roy Suttle</i>	Amount of contribution (\$) <i>30.⁰⁰</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1403 Kenwood Ave, 78704 Austin, TX</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2/20/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Terry Franz</i>	Amount of contribution (\$) <i>100.⁰⁰</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1904 Kenwood Ave, 78704 Austin, TX</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2/20/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Bruce Barrick</i>	Amount of contribution (\$) <i>100.⁰⁰</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1513 Betty Jo Dr., 78704 Austin, TX</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2/20/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Marissa Alvarez</i>	Amount of contribution (\$) <i>200.⁰⁰</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>803 E. Marroes St., 78582 Austin, TX</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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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:
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2 FILER NAME
Karl Alvarez

3 ACCOUNT # (Ethics Commission filers)

4 Date: 2/20
5 Full name of contributor: Candace & Sherel Carpenter
6 Contributor address; City; State; Zip Code: 1621 Corinder Dr., Austin, TX 78741

7 Amount of contribution (\$): 10.00
8 In-kind contribution description (if applicable):
(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date: 2/20/10
Full name of contributor: Robin Bradford
Contributor address; City; State; Zip Code: 5206 Joe Snyers Ave., Austin, TX 78756

Amount of contribution (\$): 25.00
In-kind contribution description (if applicable):
(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date: 2/21/10
Full name of contributor: Janita Pareja
Contributor address; City; State; Zip Code: 2100 Narrows Glen Hwy, Austin, TX 78756

Amount of contribution (\$): 50.00
In-kind contribution description (if applicable):
(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date: 2/21/10
Full name of contributor: Miguel Marquez
Contributor address; City; State; Zip Code: 2566 Baton Rouge Dr., San Jose, CA 95133

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)

Employer (See Instructions)

Date: 2/21/10
Full name of contributor: Leo Ramirez Jr.
Contributor address; City; State; Zip Code: 1405 Creek Blvd., Austin, TX 78746

Amount of contribution (\$): 25.00
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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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The instruction Guide explains how to complete this form.		1 Total pages Schedule A: <i>18 of 21</i>	
2 FILER NAME <i>Raul Alvarez</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>2/21/10</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Cloreal Haynes</i>	7 Amount of contribution (\$) <i>250.⁰⁰</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>1613 Garzaas Dr., Austin, TX 78758</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>2/21/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Deborah Trejo</i>	Amount of contribution (\$) <i>100.⁰⁰</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1717 Bigar St., Austin, TX 78704</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2/21/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Sean Kelly</i>	Amount of contribution (\$) <i>100.⁰⁰</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>910 Post Oak St., Austin, TX 78704</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2/21/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Teresa Rabago</i>	Amount of contribution (\$) <i>75.⁰⁰</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>612 Johana St., Austin, TX 78704</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2/21/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Susana Almaraz</i>	Amount of contribution (\$) <i>25.⁰⁰</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>16106 Vegas, Austin, TX 78741</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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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:

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2 FILER NAME

Paul Alvarez

3 ACCOUNT # (Ethics Commission filers)

4 Date

2/21/10

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

George D. Lillis

6 Contributor address; City; State; Zip Code

Austin, TX
704 W. Gibson St., 78704

7 Amount of contribution (\$)

50.00

(If travel outside of Texas, complete Schedule T)

8 In-kind contribution description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

2/21/10

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

Anthony J. B. Stephanie L. Crenshaw

Contributor address; City; State; Zip Code

Austin, TX
6203 Augusta National, 78746

Amount of contribution (\$)

200.00

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/21/10

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

Sandy Garcia

Contributor address; City; State; Zip Code

Austin, TX
9706 Orville D., 78753

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)

Employer (See Instructions)

Date

2/21/10

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

John B. Nira Oseda

Contributor address; City; State; Zip Code

Austin, TX
PO Box 19397, 78760

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)

Employer (See Instructions)

Date

2/21/10

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

Librado Almanza

Contributor address; City; State; Zip Code

Austin, TX
1406 Vargas Rd., 78741

Amount of contribution (\$)

20.00

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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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>20 of 21</i>	
2 FILER NAME <i>Paul Alvarez</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>2/21/10</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Juan Coteran</i>	7 Amount of contribution (\$) <i>25.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address: City; State; Zip Code <i>1502 Norris D., Austin, TX 78704</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>2/21/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Theresa Margaret Mendez</i>	Amount of contribution (\$) <i>50.00</i>	In-kind contribution description (if applicable)
Contributor address: City; State; Zip Code <i>6304 Torres St., Austin, TX 78741</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2/21/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Frank Morreal</i>	Amount of contribution (\$) <i>25.00</i>	In-kind contribution description (if applicable)
Contributor address: City; State; Zip Code <i>6321 Torres St., Austin, TX 78741</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2/21/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Jose Vela Elizabeth Vela</i>	Amount of contribution (\$) <i>500.00</i>	In-kind contribution description (if applicable)
Contributor address: City; State; Zip Code <i>1407 Ridgement, Austin, TX 78723</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2/21/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Peter Montoya</i>	Amount of contribution (\$) <i>50.00</i>	In-kind contribution description (if applicable)
Contributor address: City; State; Zip Code <i>2905 Prado St., Austin, TX 78702</i>		(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.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <i>21 of 21</i>	
2 FILER NAME <i>Rev I Alvarez</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>2/20/10</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Marc Leos</i>	7 Amount of contribution (\$) <i>100.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>3305 Grasshopper Dr. 78748 Austin TX</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>2/17/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Rich Negra</i>	Amount of contribution (\$) <i>200.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>10407 La Costa Dr. 78747 Austin TX</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2/12/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Luke Sanchez</i>	Amount of contribution (\$) <i>300.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>11000 Swelling Tr. 78737 Austin TX</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2/21/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>CASH</i>	Amount of contribution (\$) <i>337.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(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.

POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.		1 Total pages Schedule F: <i>1 of 17</i>
2 FILER NAME <i>Paul Alvarez</i>		3 ACCOUNT # (Ethics Commission filers)
4 Date <i>2/18/10</i>	5 Payee name <i>Office Max</i>	7 Amount (\$) <i>36.79</i>
6 Payee address; City; State; Zip Code <i>907 W. 5th St., Austin, TX 78703</i>		
8 Purpose of payment (See instructions regarding type of information required.) <i>office supplies</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 <i>2/17</i>	Payee name <i>Rene Castillo</i>	Amount (\$) <i>36.00</i>
Payee address; City; State; Zip Code <i>20401 FM 969 Webberville, TX 78653</i>		
Purpose of payment (See instructions regarding type of information required.) <i>field work</i> <small>(If travel outside of Texas, complete Schedule T)</small>		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date <i>2/17/10</i>	Payee name <i>Office Max</i>	Amount (\$) <i>41.10</i>
Payee address; City; State; Zip Code <i>907 W. 5th St., Austin, TX 78703</i>		
Purpose of payment (See instructions regarding type of information required.) <i>office supplies</i> <small>(If travel outside of Texas, complete Schedule T)</small>		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date <i>2/17</i>	Payee name <i>Rene Castillo</i>	Amount (\$) <i>45.00</i>
Payee address; City; State; Zip Code <i>20401 FM 969 Webberville, TX 78653</i>		
Purpose of payment (See instructions regarding type of information required.) <i>field work</i> <small>(If travel outside of Texas, complete Schedule T)</small>		** Complete if direct expenditure to benefit C/OH ** 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: <i>2 of 17</i>
2 FILER NAME <i>Raul Alvarez</i>		3 ACCOUNT # (Ethics Commission filers)
4 Date <i>2/17/10</i>	5 Payee name <i>Postmaster (USPS)</i>	7 Amount (\$) <i>452.00</i>
6 Payee address; City; State; Zip Code <i>510 Guadalupe St., 78702 Austin, TX</i>		
8 Purpose of payment (See instructions regarding type of information required.) <i>postage</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 <i>2/17/10</i>	Payee name <i>Warley Printing</i>	Amount (\$) <i>1219.33</i>
Payee address; City; State; Zip Code <i>3217 N. IH 35 Austin, TX 78722</i>		
Purpose of payment (See instructions regarding type of information required.) <i>Printing</i> <small>(If travel outside of Texas, complete Schedule T)</small>		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date <i>2/17/10</i>	Payee name <i>Katy Westbrock</i>	Amount (\$) <i>54.00</i>
Payee address; City; State; Zip Code <i>3809 Spicewood Sp-165 #121 Austin, TX 78759</i>		
Purpose of payment (See instructions regarding type of information required.) <i>field work</i> <small>(If travel outside of Texas, complete Schedule T)</small>		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date <i>2/16/10</i>	Payee name <i>Katy Westbrock</i>	Amount (\$) <i>18.00</i>
Payee address; City; State; Zip Code <i>3809 Spicewood Sp-165 #121 Austin, TX 78759</i>		
Purpose of payment (See instructions regarding type of information required.) <i>Field work</i> <small>(If travel outside of Texas, complete Schedule T)</small>		** Complete if direct expenditure to benefit C/OH ** 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:
3 of 17

2 FILER NAME *Raul Alvarez* 3 ACCOUNT # (Ethics Commission filers)

4 Date <i>2/16/10</i>	5 Payee name <i>Office Max</i>	7 Amount (\$) <i>44.37</i>
6 Payee address; City; State; Zip Code <i>907 W. Sta St., Austin, TX 78703</i>		

8 Purpose of payment (See instructions regarding type of information required.) <i>office supplies</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
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Date <i>2/16/10</i>	Payee name <i>Office Max</i>	Amount (\$) <i>44.91</i>
Payee address; City; State; Zip Code <i>907 W. Sta St., Austin, TX 78703</i>		

Purpose of payment (See instructions regarding type of information required.) <i>office supplies</i> <small>(If travel outside of Texas, complete Schedule T)</small>	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date <i>2/16/10</i>	Payee name <i>Office Max</i>	Amount (\$) <i>64.41</i>
Payee address; City; State; Zip Code <i>907 W. Sta St., Austin, TX 78703</i>		

Purpose of payment (See instructions regarding type of information required.) <i>office supplies</i> <small>(If travel outside of Texas, complete Schedule T)</small>	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date <i>2/16/10</i>	Payee name <i>Jason Walker</i>	Amount (\$) <i>72.00</i>
Payee address; City; State; Zip Code <i>5501 Woodrow Ave., Austin, TX 78757</i>		

Purpose of payment (See instructions regarding type of information required.) <i>field work</i> <small>(If travel outside of Texas, complete Schedule T)</small>	** Complete if direct expenditure to benefit C/OH ** 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: <i>4 of 17</i>
2 FILER NAME <i>Raul Alvarez</i>		3 ACCOUNT # (Ethics Commission filers)
4 Date <i>2/16/10</i>	5 Payee name <i>Mysth Easterwood</i>	7 Amount (\$) <i>76.50</i>
6 Payee address; City; State; Zip Code <i>4532 B. Duval St. Austin, TX 78751</i>		
8 Purpose of payment (See instructions regarding type of information required.) <i>Field work</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>2/16/10</i>	Payee name <i>Jim Nash</i>	Amount (\$) <i>108.00</i>
Payee address; City; State; Zip Code <i>2204 Brewster St., Austin, TX 78704</i>		
Purpose of payment (See instructions regarding type of information required.) <i>Field work</i> <small>(If travel outside of Texas, complete Schedule T)</small>		<small>** Complete if direct expenditure to benefit C/OH **</small> Candidate / Officeholder name Office sought Office held
Date <i>2/16/10</i>	Payee name <i>Rahmon Bhaleshq</i>	Amount (\$) <i>132.00</i>
Payee address; City; State; Zip Code <i>2889 San Gabriel St. A. Austin, TX 78705</i>		
Purpose of payment (See instructions regarding type of information required.) <i>Field work</i> <small>(If travel outside of Texas, complete Schedule T)</small>		<small>** Complete if direct expenditure to benefit C/OH **</small> Candidate / Officeholder name Office sought Office held
Date <i>2/16/10</i>	Payee name <i>Camila Pulecio</i>	Amount (\$) <i>150.00</i>
Payee address; City; State; Zip Code <i>6500 Champion Garden Way Austin, TX 78750</i>		
Purpose of payment (See instructions regarding type of information required.) <i>Field work</i> <small>(If travel outside of Texas, complete Schedule T)</small>		<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: <i>5 of 17</i>
2 FILER NAME <i>Raul Alvarez</i>		3 ACCOUNT # (Ethics Commission filers)
4 Date <i>2/16/10</i>	5 Payee name <i>Postmaster (USPS)</i>	7 Amount (\$) <i>560.00</i>
6 Payee address; City; State; Zip Code <i>510 Guadalupe St. 78702 Austin, TX</i>		
8 Purpose of payment (See instructions regarding type of information required.) <i>Postage</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>2/16/10</i>	Payee name <i>Marcill 4.5</i>	Amount (\$) <i>400.00</i>
Payee address; City; State; Zip Code <i>6500 Champion Grandview Way, Austin, TX 78750</i>		
Purpose of payment (See instructions regarding type of information required.) <i>consulting</i> <small>(If travel outside of Texas, complete Schedule T)</small>		<small>** Complete if direct expenditure to benefit C/OH **</small> Candidate / Officeholder name Office sought Office held
Date <i>2/16/10</i>	Payee name <i>Harland Clark</i>	Amount (\$) <i>24.19</i>
Payee address; City; State; Zip Code <i>10931 Laureate Dr. San Antonio, TX 78249</i>		
Purpose of payment (See instructions regarding type of information required.) <i>checks</i> <small>(If travel outside of Texas, complete Schedule T)</small>		<small>** Complete if direct expenditure to benefit C/OH **</small> Candidate / Officeholder name Office sought Office held
Date <i>2/12/10</i>	Payee name <i>Raul Gooch</i>	Amount (\$) <i>31.00</i>
Payee address; City; State; Zip Code <i>1131 Hollow Creek Dr. # 110 78204 Austin, TX</i>		
Purpose of payment (See instructions regarding type of information required.) <i>field work</i> <small>(If travel outside of Texas, complete Schedule T)</small>		<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: <i>6 of 17</i>
2 FILER NAME <i>Raul Alvarez</i>		3 ACCOUNT # (Ethics Commission filers)
4 Date <i>2/12/10</i>	5 Payee name <i>Office Max</i>	7 Amount (\$) <i>96.85</i>
6 Payee address; City; State; Zip Code <i>907 W. 5th St. Austin, TX 78703</i>		
8 Purpose of payment (See instructions regarding type of information required.) <i>office supplies</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>2/12/10</i>	Payee name <i>USPS (Postmaster)</i>	Amount (\$) <i>352.00</i>
Payee address; City; State; Zip Code <i>510 Guadalupe St. Austin, TX 78702</i>		
Purpose of payment (See instructions regarding type of information required.) <i>postage</i> <small>(If travel outside of Texas, complete Schedule T)</small>		<small>** Complete if direct expenditure to benefit C/OH **</small> Candidate / Officeholder name Office sought Office held
Date <i>2/12/10</i>	Payee name <i>Billy Stallings</i>	Amount (\$) <i>350.00</i>
Payee address; City; State; Zip Code <i>1131 Hollow Creek Austin, TX 78704</i>		
Purpose of payment (See instructions regarding type of information required.) <small>(If travel outside of Texas, complete Schedule T)</small>		<small>** Complete if direct expenditure to benefit C/OH **</small> Candidate / Officeholder name Office sought Office held
Date <i>2/11/10</i>	Payee name <i>Dave Wolf</i>	Amount (\$) <i>75.00</i>
Payee address; City; State; Zip Code		
Purpose of payment (See instructions regarding type of information required.) <i>Sound Engineering</i> <small>(If travel outside of Texas, complete Schedule T)</small>		<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: <i>7 of 17</i>
2 FILER NAME <i>Paul Alvarez</i>		3 ACCOUNT # (Ethics Commission filers)
4 Date <i>2/10/10</i>	5 Payee name <i>Katie Johns</i>	7 Amount (\$) <i>154.00</i>
6 Payee address; City; State; Zip Code <i>1300 Garner Ave, Austin, TX 78704</i>		
8 Purpose of payment (See instructions regarding type of information required.) <i>field work</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>2/10/10</i>	Payee name <i>Worley Printing</i>	Amount (\$) <i>1570.00</i>
Payee address; City; State; Zip Code <i>3217 N. IH 35, Austin, TX 78722</i>		
Purpose of payment (See instructions regarding type of information required.) <i>printing</i> <small>(If travel outside of Texas, complete Schedule T)</small>		<small>** Complete if direct expenditure to benefit C/OH **</small> Candidate / Officeholder name Office sought Office held
Date <i>2/12/10</i>	Payee name <i>Diane Wiedenkepf</i>	Amount (\$) <i>100.00</i>
Payee address; City; State; Zip Code <i>407 E. 7th St. Austin, TX 78701</i>		
Purpose of payment (See instructions regarding type of information required.) <i>web design</i> <small>(If travel outside of Texas, complete Schedule T)</small>		<small>** Complete if direct expenditure to benefit C/OH **</small> Candidate / Officeholder name Office sought Office held
Date <i>2/20/10</i>	Payee name <i>Katy Westbrook</i>	Amount (\$) <i>47.25</i>
Payee address; City; State; Zip Code <i>3809 Spirewood Springs #121 Austin, TX 78759</i>		
Purpose of payment (See instructions regarding type of information required.) <i>field work</i> <small>(If travel outside of Texas, complete Schedule T)</small>		<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:

8 of 17

2 FILER NAME

Raul Alvarez

3 ACCOUNT # (Ethics Commission filers)

4 Date

2/1/10

5 Payee name

Wgt. Mart

6 Payee address; City; State; Zip Code

710 E. Ban White Blvd, 78704

7 Amount (\$)

86.32

8 Purpose of payment (See instructions regarding type of information required.)

office supplies

(If travel outside of Texas, complete Schedule T)

9 ** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name Office sought Office held

Date

2/1/10

Payee name

Rahman Bhalesha

Payee address; City; State; Zip Code

2819 San Gabriel St. A, 78705

Amount (\$)

197.00

Purpose of payment (See instructions regarding type of information required.)

field work

(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name Office sought Office held

Date

2/1/10

Payee name

Mysti Eastwood

Payee address; City; State; Zip Code

4532 B. Duvall St., 78751

Amount (\$)

228.00

Purpose of payment (See instructions regarding type of information required.)

field work

(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name Office sought Office held

Date

2/1/10

Payee name

Katie Johns

Payee address; City; State; Zip Code

1300 Garner Ave, 78704

Amount (\$)

245.92

Purpose of payment (See instructions regarding type of information required.)

field work

(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit C/OH **

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:
9 of 17

2 FILER NAME

Paul Alvarez

3 ACCOUNT # (Ethics Commission filers)

4 Date

2/9/10

5 Payee name

Wal-Mart

7 Amount (\$)

53.71

6 Payee address; City; State; Zip Code

*Austin, TX
710 E. Ben White Blvd. 78704*

8 Purpose of payment (See instructions regarding type of information required.)

Office supplies

(If travel outside of Texas, complete Schedule T)

9 ** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name Office sought Office held

Date

2/9/10

Payee name

Q.T. Preston

Amount (\$)

61.00

Payee address; City; State; Zip Code

*Austin, TX
1300 Cossing Place #1101 78741*

Purpose of payment (See instructions regarding type of information required.)

field work

(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name Office sought Office held

Date

2/9/10

Payee name

Rhaman Bhalesra

Amount (\$)

63.00

Payee address; City; State; Zip Code

*Austin, TX
2819 San Gabriel St. A 78705*

Purpose of payment (See instructions regarding type of information required.)

field work

(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name Office sought Office held

Date

2/9/10

Payee name

Tracy Price

Amount (\$)

117.00

Payee address; City; State; Zip Code

*Austin, TX
3527 Graystone Apt. 172 78737*

Purpose of payment (See instructions regarding type of information required.)

field work

(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit C/OH **

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: <i>10 of 17</i>
2 FILER NAME <i>Raul Alvarez</i>		3 ACCOUNT # (Ethics Commission filers)
4 Date <i>2/8/10</i>	5 Payee name <i>Jim Nash</i>	7 Amount (\$) <i>27.00</i>
6 Payee address; City; State; Zip Code <i>2204 Bowstar St, Austin, TX 78704</i>		
8 Purpose of payment (See instructions regarding type of information required.) <i>Field work</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>2/8/10</i>	Payee name <i>Rene Castillo</i>	Amount (\$) <i>27.00</i>
Payee address; City; State; Zip Code <i>20401 FM 969, Webberville, TX 78653</i>		
Purpose of payment (See instructions regarding type of information required.) <i>Field work</i> <small>(If travel outside of Texas, complete Schedule T)</small>		<small>** Complete if direct expenditure to benefit C/OH **</small> Candidate / Officeholder name Office sought Office held
Date <i>2/8/10</i>	Payee name <i>Camila Pulecio</i>	Amount (\$) <i>189.00</i>
Payee address; City; State; Zip Code <i>6500 Champion Grandview Way Austin, TX 78750</i>		
Purpose of payment (See instructions regarding type of information required.) <i>field work</i> <small>(If travel outside of Texas, complete Schedule T)</small>		<small>** Complete if direct expenditure to benefit C/OH **</small> Candidate / Officeholder name Office sought Office held
Date <i>2/8/10</i>	Payee name <i>Postmaster (USPS)</i>	Amount (\$) <i>2.32.00</i>
Payee address; City; State; Zip Code <i>510 Guadalupe St, Austin, TX 78702</i>		
Purpose of payment (See instructions regarding type of information required.) <i>postage</i> <small>(If travel outside of Texas, complete Schedule T)</small>		<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: <i>11 of 17</i>	
2 FILER NAME <i>Paul Alvarez</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>2/8/10</i>	5 Payee name <i>Jason Walker</i>	7 Amount (\$) <i>63.00</i>	
6 Payee address; City; State; Zip Code <i>5501 Woodrow Ave Austin TX 78757</i>			
8 Purpose of payment (See instructions regarding type of information required.) <i>Field work</i> (If travel outside of Texas, complete Schedule T)		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held	
Date <i>2/8/10</i>	Payee name <i>Zyanya Lopez</i>	Amount (\$) <i>117.00</i>	
Payee address; City; State; Zip Code <i>10603 Ponder Ln., Austin TX 78719</i>			
Purpose of payment (See instructions regarding type of information required.) <i>Field work</i> (If travel outside of Texas, complete Schedule T)		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held	
Date <i>2/8/10</i>	Payee name <i>Jose Gallardo</i>	Amount (\$) <i>500.00</i>	
Payee address; City; State; Zip Code <i>2210 S. 3rd St., Austin TX 78704</i>			
Purpose of payment (See instructions regarding type of information required.) <i>Sign Distribution</i> (If travel outside of Texas, complete Schedule T)		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held	
Date <i>2/5/10</i>	Payee name <i>Lavelle Franklin</i>	Amount (\$) <i>180.00</i>	
Payee address; City; State; Zip Code <i>3524 Gunstones Apt 172 Austin TX 78731</i>			
Purpose of payment (See instructions regarding type of information required.) <i>Field work</i> (If travel outside of Texas, complete Schedule T)		** Complete if direct expenditure to benefit C/OH ** 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: <i>12 of 17</i>
2 FILER NAME <i>Paul Alvarez</i>		3 ACCOUNT # (Ethics Commission filers)
4 Date <i>2/3/10</i>	5 Payee name <i>Juan Meza</i>	7 Amount (\$) <i>500.00</i>
6 Payee address; City; State; Zip Code <i>2300 E. Case Chavez, Austin, TX 78704</i>		
8 Purpose of payment (See instructions regarding type of information required.) <i>rent</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>2/2/10</i>	Payee name <i>Uncovered</i>	Amount (\$) <i>45.00</i>
Payee address; City; State; Zip Code <i>900 E. 7th St., Austin, TX 78702</i>		
Purpose of payment (See instructions regarding type of information required.) <i>event food</i> <small>(If travel outside of Texas, complete Schedule T)</small>		<small>** Complete if direct expenditure to benefit C/OH **</small> Candidate / Officeholder name Office sought Office held
Date <i>2/2/10</i>	Payee name <i>AWPC</i>	Amount (\$) <i>65.00</i>
Payee address; City; State; Zip Code <i>PO Box 12383, Austin, TX 78711</i>		
Purpose of payment (See instructions regarding type of information required.) <i>Annual Dues</i> <small>(If travel outside of Texas, complete Schedule T)</small>		<small>** Complete if direct expenditure to benefit C/OH **</small> Candidate / Officeholder name Office sought Office held
Date <i>2/2/10</i>	Payee name <i>Office Max</i>	Amount (\$) <i>189.13</i>
Payee address; City; State; Zip Code <i>907 W. 5th St., Austin, TX 78703</i>		
Purpose of payment (See instructions regarding type of information required.) <i>office supplies</i> <small>(If travel outside of Texas, complete Schedule T)</small>		<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: <i>13 of 17</i>
2 FILER NAME <i>Raul Alvarez</i>		3 ACCOUNT # (Ethics Commission filers)
4 Date <i>2/4/10</i>	5 Payee name <i>Lloyd Blue II</i>	7 Amount (\$) <i>45.00</i>
6 Payee address; City; State; Zip Code <i>5401 Busk Ave Austin, TX 78723</i>		
8 Purpose of payment (See instructions regarding type of information required.) <i>field work</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>2/4/10</i>	Payee name <i>Brandon Turner</i>	Amount (\$) <i>306.75</i>
Payee address; City; State; Zip Code <i>1300 Crossing Plce #114, 78741 Austin, TX</i>		
Purpose of payment (See instructions regarding type of information required.) <i>field work</i> <small>(If travel outside of Texas, complete Schedule T)</small>		<small>** Complete if direct expenditure to benefit C/OH **</small> Candidate / Officeholder name Office sought Office held
Date <i>2/3/10</i>	Payee name <i>Katie Johns</i>	Amount (\$) <i>54.00</i>
Payee address; City; State; Zip Code <i>1300 Garner Ave Austin, TX 78704</i>		
Purpose of payment (See instructions regarding type of information required.) <i>field work</i> <small>(If travel outside of Texas, complete Schedule T)</small>		<small>** Complete if direct expenditure to benefit C/OH **</small> Candidate / Officeholder name Office sought Office held
Date <i>2/3/10</i>	Payee name <i>Caleb Ellenberger</i>	Amount (\$) <i>72.00</i>
Payee address; City; State; Zip Code <i>1307 Siffers Austin, TX 78723</i>		
Purpose of payment (See instructions regarding type of information required.) <i>field work</i> <small>(If travel outside of Texas, complete Schedule T)</small>		<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:
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2 FILER NAME
Raul Alvarez

3 ACCOUNT # (Ethics Commission filers)

4 Date
2/5/10

5 Payee name
Mysti Easterwood
6 Payee address; City; State; Zip Code
4532 B. Duval St. Austin, TX 78751

7 Amount (\$)
200.50

8 Purpose of payment (See instructions regarding type of information required.)
field work
(If travel outside of Texas, complete Schedule T)

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

Date
2/5/10

Payee name
Nan Bridges
Payee address; City; State; Zip Code

Amount (\$)
81.00

Purpose of payment (See instructions regarding type of information required.)
field work
(If travel outside of Texas, complete Schedule T)

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

Date
2/5/10

Payee name
Billy Stallings
Payee address; City; State; Zip Code
1131 Hollow Creek Dr. #205, Austin, TX 78704

Amount (\$)
450.00

Purpose of payment (See instructions regarding type of information required.)
Campaign administration
(If travel outside of Texas, complete Schedule T)

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

Date
2/5/10

Payee name
J. Mancillas
Payee address; City; State; Zip Code
6500 Champion Grande Blvd Austin, TX 78750

Amount (\$)
750.00

Purpose of payment (See instructions regarding type of information required.)
consulting
(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit C/OH **
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: <i>15 of 17</i>
2 FILER NAME <i>Raul Alvarez</i>		3 ACCOUNT # (Ethics Commission filers)
4 Date <i>2/2/10</i>	5 Payee name <i>Carmita Pulecio</i>	7 Amount (\$) <i>369.⁰⁰</i>
6 Payee address; City; State; Zip Code <i>6500 Grandview Chapter Way, Austin, TX 78750</i>		
8 Purpose of payment (See instructions regarding type of information required.) <i>field work</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>2/2/10</i>	Payee name <i>Progressive Capital</i>	Amount (\$) <i>2000.⁰⁰</i>
Payee address; City; State; Zip Code <i>611 S. Congress Ave, Austin, TX 78704</i>		
Purpose of payment (See instructions regarding type of information required.) <i>fundraising</i> <small>(If travel outside of Texas, complete Schedule T)</small>		<small>** Complete if direct expenditure to benefit C/OH **</small> Candidate / Officeholder name Office sought Office held
Date <i>2/2/10</i>	Payee name <i>Zyanya Lopez</i>	Amount (\$) <i>81.⁰⁰</i>
Payee address; City; State; Zip Code <i>10603 Ponder Ln. Austin, TX 78719</i>		
Purpose of payment (See instructions regarding type of information required.) <i>field work</i> <small>(If travel outside of Texas, complete Schedule T)</small>		<small>** Complete if direct expenditure to benefit C/OH **</small> Candidate / Officeholder name Office sought Office held
Date <i>2/2/10</i>	Payee name <i>Charlotte Nelson</i>	Amount (\$) <i>99.⁰⁰</i>
Payee address; City; State; Zip Code <i>22 Acadia Ave. Austin, TX 78701</i>		
Purpose of payment (See instructions regarding type of information required.) <i>field work</i> <small>(If travel outside of Texas, complete Schedule T)</small>		<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: <i>16 of 17</i>
2 FILER NAME <i>Paul Alvarez</i>		3 ACCOUNT # (Ethics Commission filers)
4 Date <i>2/1/10</i>	5 Payee name <i>Letrons</i>	7 Amount (\$) <i>5.20</i>
6 Payee address; City; State; Zip Code <i>807 E. 9th St, Austin, TX 78702</i>		
8 Purpose of payment (See instructions regarding type of information required.) <i>Meals for office</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 <i>2/1/10</i>	Payee name <i>Caleb Ellenberger</i>	Amount (\$) <i>54.00</i>
Payee address; City; State; Zip Code <i>1307 S. Polk, Austin, TX 78723</i>		
Purpose of payment (See instructions regarding type of information required.) <i>Field work</i> <small>(If travel outside of Texas, complete Schedule T)</small>		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date <i>2/1/10</i>	Payee name <i>Jason Walker</i>	Amount (\$) <i>54.00</i>
Payee address; City; State; Zip Code <i>5501 Woodrow Ave, Austin, TX 78757</i>		
Purpose of payment (See instructions regarding type of information required.) <i>Field work</i> <small>(If travel outside of Texas, complete Schedule T)</small>		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date <i>2/1/10</i>	Payee name <i>Jim Nash</i>	Amount (\$) <i>81.00</i>
Payee address; City; State; Zip Code <i>2204 Royster St, Austin, TX 78704</i>		
Purpose of payment (See instructions regarding type of information required.) <i>Field work</i> <small>(If travel outside of Texas, complete Schedule T)</small>		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held

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SCHEDULE F

The instruction Guide explains how to complete this form.		1 Total pages Schedule F: <i>17 of 17</i>
2 FILER NAME <i>Paul Alvarez</i>		3 ACCOUNT # (Ethics Commission filers)
4 Date <i>2/1/10</i>	5 Payee name <i>Jason Walker</i>	7 Amount (\$) <i>81.00</i>
6 Payee address; City; State; Zip Code <i>5501 Woodrow Ave, Austin, TX 78757</i>		
8 Purpose of payment (See instructions regarding type of information required.) <i>Food truck</i> (If travel outside of Texas, complete Schedule T)		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date <i>2/18/10</i>	Payee name <i>P.O. DEER</i>	Amount (\$) <i>250.00</i>
Payee address; City; State; Zip Code <i>P.O. Box 6237, Austin, TX 78762</i>		
Purpose of payment (See instructions regarding type of information required.) <i>Ad space</i> (If travel outside of Texas, complete Schedule T)		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date <i>2/21/10</i>	Payee name <i>Pirya</i>	Amount (\$) <i>197.10</i>
Payee address; City; State; Zip Code <i>401 W. 15th St., 520 Austin, TX 78701</i>		
Purpose of payment (See instructions regarding type of information required.) <i>online materials</i> (If travel outside of Texas, complete Schedule T)		** 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.) (If travel outside of Texas, complete Schedule T)		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held

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