

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

7527

FORM JC/OH
COVER SHEET PG 1

The JC/OH Instruction Guide explains how to complete this form.		1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	<input checked="" type="radio"/> MS / <input type="radio"/> MRS / <input type="radio"/> MR FIRST: Nancy MI: W NICKNAME: LAST: Hohengarten SUFFIX:	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 PO Box 1748 Austin, TX 78767 DANA DEBEAUVON COUNTY CLERK TRAVIS COUNTY	FILED FOR REPORT JAN 11 11 AM	
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE: PHONE NUMBER: EXTENSION: (512) 554-6428		
6 CAMPAIGN TREASURER NAME	<input type="radio"/> MS / <input checked="" type="radio"/> MRS / <input type="radio"/> MR FIRST: Larry MI: M NICKNAME: LAST: Saver SUFFIX:		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE		
8 CAMPAIGN TREASURER PHONE	AREA CODE: PHONE NUMBER: EXTENSION: ()		
9 REPORT TYPE	<input checked="" 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 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 7 / 1 / 10 12 / 31 / 10		
11 ELECTION	ELECTION DATE Month Day Year 11 / 2 / 10	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any) TransCo. Court at Law 5	13 OFFICE SOUGHT (if known) Same	
14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS	DIRECT CAMPAIGN EXPENDITURES ARE CAMPAIGN EXPENDITURES MADE BY OTHERS WITHOUT THE CANDIDATE'S PRIOR CONSENT OR APPROVAL. CANDIDATES ARE REQUIRED TO DISCLOSE THIS INFORMATION ONLY IF THEY RECEIVE NOTIFICATION OF THE DIRECT CAMPAIGN EXPENDITURE. Name: Address / PO Box: Apt / Suite #: City: State: Zip Code:		
<input type="checkbox"/> additional pages			

GO TO PAGE 2

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

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

15 C/OH NAME Nancy Hohengarten 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.

additional pages

COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS
<input type="checkbox"/> SPECIFIC	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	\$ 669
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) <u>Including In Kind</u>	\$ 18194.48
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ —
	4. TOTAL POLITICAL EXPENDITURES	\$ 7707.46
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 10,286.17
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ n/a

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.

Nancy Hohengarten
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL

Sworn to and subscribed before me, by the said Nancy Hohengarten this the 18 day of JAN. 20 11, to certify which, witness my hand and seal of office.

Art Guerrero
Signature of officer administering oath

ART. GUERRERO
Print name of officer administering oath

NOTARY PUBLIC
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 23	
2 FILER NAME NANCY HOHENGARTEN		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 11-1-10	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sumpter & Gonzalez	7 Amount of contribution (\$) 250.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 206 E. 9th St, Suite 1511 Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation law firm		10 Contributor's job title	
11 Contributor's employer/law firm		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			

Date 10-21-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sandra Ritz	Amount of contribution (\$) 200.48	In-kind contribution description (if applicable) Food & Drink
Contributor address; City; State; Zip Code 902 Rio Grande Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Atty		Contributor's job title Atty	
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

Date 10-21-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amy Manor	Amount of contribution (\$) 200.00	In-kind contribution description (if applicable) Birthday Cake
Contributor address; City; State; Zip Code 17809 Greener Cove Pflugerville, TX 78660		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Court administration		Contributor's job title Deputy County Clerk	
Contributor's employer/law firm Travis Co.		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

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

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 23	
2 FILER NAME NANCY HOHENGARTEN		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 10-21-10	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Antonio Wehnes	7 Amount of contribution (\$) 250.00	8 In-kind contribution description (if applicable)
6 Contributor address: City; State; Zip Code 1602 E. 7th Austin, TX 78702		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation Atty		10 Contributor's job title Atty	
11 Contributor's employer/law firm Self		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 10-21-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elsie Craven	Amount of contribution (\$) 125.00	In-kind contribution description (if applicable)
Contributor address: City; State; Zip Code 1112 Cripple Creek Pr. Austin, TX 78758		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Atty		Contributor's job title Atty	
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 10-21-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christopher Perril	Amount of contribution (\$) 75.00	In-kind contribution description (if applicable)
Contributor address: City; State; Zip Code 1504 West Ave Austin TX 78701		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Atty		Contributor's job title Atty	
Contributor's employer/law firm Joseph Turner		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

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

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The instruction Guide explains how to complete this form. 1 Total pages Schedule A(J): **23**

2 FILER NAME **NANCY HOHENGARTEN** 3 ACCOUNT # (Ethics Commission Filers)

4 Date 10-21-10	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Joseph Turner	7 Amount of contribution (\$) 250.00	8 In-kind contribution description (if applicable)
	6 Contributor address: City: State: Zip Code 1504 West Ave Austin, TX 78701	(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation **Atty** 10 Contributor's job title **Atty**

11 Contributor's employer/law firm **Self** 12 Law firm of contributor's spouse (if any)

13 If contributor is a child, law firm of parent(s) (if any)

Date 10-21-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Granger & Mueller	Amount of contribution (\$) 1,000.00	In-kind contribution description (if applicable)
	Contributor address: City: State: Zip Code 605 W. 10th Austin, TX 78701	(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation **law firm** Contributor's job title

Contributor's employer/law firm Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date 10-21-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Peek & Toland	Amount of contribution (\$) 350.00	In-kind contribution description (if applicable)
	Contributor address: City: State: Zip Code 1214 E. 7th Austin, TX 78702	(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation **Law Firm** Contributor's job title

Contributor's employer/law firm Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The instruction Guide explains how to complete this form. 1 Total pages Schedule A(J): **23**

2 FILER NAME **NANCY HOHENGARTEN** 3 ACCOUNT # (Ethics Commission Filers)

4 Date 10-21-10	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Randy Leavitt	7 Amount of contribution (\$) 250.00	8 In-kind contribution description (if applicable)
	6 Contributor address: City: State: Zip Code 1301 Rio Grande Austin, TX 78701	(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation **Atty** 10 Contributor's job title **Atty**

11 Contributor's employer/law firm **Self** 12 Law firm of contributor's spouse (if any)

13 If contributor is a child, law firm of parent(s) (if any)

Date 10-19-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Benjamin Blackburn	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
	Contributor address: City: State: Zip Code 1106 San Antonio Austin, TX 78701	(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation **Atty** Contributor's job title **Atty**

Contributor's employer/law firm **Blackburn & Vargas** Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date 10-21-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: The McMinn Law Firm	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
	Contributor address: City: State: Zip Code 502 W. 14th St. Austin TX 78701	(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation **Law Firm** Contributor's job title

Contributor's employer/law firm Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 23	
2 FILER NAME NANCY HOHENGARTEN		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 10-21-10	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Montford & Mc Nelis	7 Amount of contribution (\$) 100.06	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 505 W. 15th Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation Atty		10 Contributor's job title Atty	
11 Contributor's employer/law firm Self		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			

Date 8-9-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Dand Chambers	Amount of contribution (\$) 1,000.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 1104 Nueces, Suite 208 Austin TX 78701		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Attorney		Contributor's job title Attorney	
Contributor's employer/law firm Chambers & Assoc.		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

Date 11-30-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Donald McCarthy	Amount of contribution (\$) 125.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 808 W. 11th Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Attorney		Contributor's job title Attorney	
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 23	
2 FILER NAME NANCY HOHENGARTEN		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 10-14-10	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minton Burton Foster Collins	7 Amount of contribution (\$) 500.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 1100 Guadalupe Austin, TX 78701		(if travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation law firm		10 Contributor's job title	
11 Contributor's employer/law firm		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			

Date 10-7-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Sheppard	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 700 Lavaca St Suite 1550 Austin TX 78701		(if travel outside of Texas, complete Schedule T)	
Contributor's principal occupation lawyer		Contributor's job title lawyer	
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

Date 10-7-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruce Fox	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 404 W. 13th Austin TX 78701		(if travel outside of Texas, complete Schedule T)	
Contributor's principal occupation lawyer		Contributor's job title lawyer	
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

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

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J): **23**

2 FILER NAME **NANCY HOHENGARTEN**

3 ACCOUNT # (Ethics Commission Filers)

4 Date **10-7-10**
 5 Full name of contributor out-of-state PAC (ID#: _____)
Mark McCrimmon
 6 Contributor address; City; State; Zip Code
**900 Rio Grande
 Austin TX 78701**

7 Amount of contribution (\$) **125.00**
 8 In-kind contribution description (if applicable)
 (If travel outside of Texas, complete Schedule T)

9 Contributor's principal occupation **lawyer**

10 Contributor's job title **lawyer**

11 Contributor's employer/law firm **self**

12 Law firm of contributor's spouse (if any)

13 If contributor is a child, law firm of parent(s) (if any)

Date **10-7-10**
 Full name of contributor out-of-state PAC (ID#: _____)
Betty Blackwell
 Contributor address; City; State; Zip Code
**1306 Nueces
 Austin, TX 78701**

Amount of contribution (\$) **500.00**
 In-kind contribution description (if applicable)
 (If travel outside of Texas, complete Schedule T)

Contributor's principal occupation **lawyer**

Contributor's job title **lawyer**

Contributor's employer/law firm **self**

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date **10-7-10**
 Full name of contributor out-of-state PAC (ID#: _____)
Chris Sullivan
 Contributor address; City; State; Zip Code
**9907 B Hundred Oaks Cir.
 Austin, TX 78750**

Amount of contribution (\$) **100.00**
 In-kind contribution description (if applicable)
 (If travel outside of Texas, complete Schedule T)

Contributor's principal occupation **lawyer**

Contributor's job title **lawyer**

Contributor's employer/law firm **self**

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 23	
2 FILER NAME NANCY HOHENGARTEN		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 10-8-10	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Joe Futch	7 Amount of contribution (\$) 250.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 4804 Gypsy Cove Austin TX 78727		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation Atty		10 Contributor's job title Atty	
11 Contributor's employer/law firm self		12 Law firm of contributor's spouse (if any)	

13 If contributor is a child, law firm of parent(s) (if any)

Date 10-8-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kenneth Gibson	Amount of contribution (\$) 1000.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 700 Lavaca Suite 1016 Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Atty		Contributor's job title Atty	
Contributor's employer/law firm Zunker Crane & Gibson		Law firm of contributor's spouse (if any)	

If contributor is a child, law firm of parent(s) (if any)

Date 10-9-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Frances Musgrove	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2911 Briana Wood Lane Cedar Park, TX 78613		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation		Contributor's job title	
Contributor's employer/law firm		Law firm of contributor's spouse (if any)	

If contributor is a child, law firm of parent(s) (if any)

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 23	
2 FILER NAME NANCY HOHENGARTEN		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 10-11-10	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Dunham Law Firm	7 Amount of contribution (\$) 1000.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 1800 Guadalupe Austin TX 78701		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation law firm		10 Contributor's job title	
11 Contributor's employer/law firm		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			

Date 10-20-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Ricardo Maldonado	Amount of contribution (\$) 150.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 812 San Antonio Suite 101 Austin TX 78701		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation atty		Contributor's job title atty	
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

Date 10-14-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Helen Dey Valdez	Amount of contribution (\$) 125.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 312 Le Grande Ave Austin TX 78704		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Administration		Contributor's job title Director of Communication	
Contributor's employer/law firm Linebarger Boggen Blair & Sampson		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A(J): **23**

2 FILER NAME **NANCY HOHENGARTEN** 3 ACCOUNT # (Ethics Commission Filers)

4 Date 10-14-10	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dax Garvin	7 Amount of contribution (\$) 250.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 812 San Antonio Suite 403 Austin TX 78701		(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation Atty	10 Contributor's job title Atty
11 Contributor's employer/law firm self	12 Law firm of contributor's spouse (if any)

13 If contributor is a child, law firm of parent(s) (if any)

Date 10-14-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Mark Westenhover	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 404 W. 13th Austin TX 78701		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation Atty	Contributor's job title Atty
Contributor's employer/law firm self	Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date 10-14-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) William Marge	Amount of contribution (\$) 125.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 600 W. 13th Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation atty	Contributor's job title atty
Contributor's employer/law firm self	Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)** **SCHEDULE A (J)**

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A(J): **23**

2 FILER NAME **NANCY HOHENGARTEN** 3 ACCOUNT # (Ethics Commission Filers)

4 Date 10-14-10	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fernando Martinez	7 Amount of contribution (\$) 125.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 1604 San Antonio Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation atty	10 Contributor's job title atty
11 Contributor's employer/law firm self	12 Law firm of contributor's spouse (if any)

13 If contributor is a child, law firm of parent(s) (if any)

Date 10-20-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) EG Morris	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 608 W. 12th Suite B Austin TX 78701		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation Atty	Contributor's job title Atty
Contributor's employer/law firm self	Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)	

Date 10-19-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cheryl Hinderera	Amount of contribution (\$) 1000.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 6321 Tasajillo Trail Austin TX 78739		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation Atty	Contributor's job title Atty
Contributor's employer/law firm Self	Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)	

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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 (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 23	
2 FILER NAME NANCY HOHENGARTEN		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 10-16-10	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martha Coons	7 Amount of contribution (\$) 200.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 1605 Niles Rd Austin TX 78703		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation Admin Assb.		10 Contributor's job title Admin. Assl.	
11 Contributor's employer/law firm Dr. Richard Coons		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			

Date 10-20-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berkley Beths	Amount of contribution (\$) 125.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 5607 Montview Austin TX 78756		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Atty		Contributor's job title Atty	
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

Date 10-18-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown McCarroll PAC	Amount of contribution (\$) 125.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 111 Congress Ave Austin TX 78701		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation law firm PAC		Contributor's job title	
Contributor's employer/law firm		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

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

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 23	
2 FILER NAME NANCY HOHENGARTEN		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 10-21-10	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Charles Betts	7 Amount of contribution (\$) 100.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 14741 Arrowhead Dr. Volente TX 78641		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation Administrator		10 Contributor's job title Exec Director	
11 Contributor's employer/law firm Downtown Austin Alliance		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			

Date 10-21-10	Full name of contributor, <input type="checkbox"/> out-of-state PAC (ID#: Lopez & Uribe	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 801 W. Oltorf Austin, TX 78704		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation law partnership		Contributor's job title	
Contributor's employer/law firm		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

Date 10-21-10	Full name of contributor, <input type="checkbox"/> out-of-state PAC (ID#: Kellie Bailey	Amount of contribution (\$) 125.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2200 Woodmont Ave Austin TX 78703		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Atty		Contributor's job title Atty	
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

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

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A(J): 23	
2 FILER NAME NANCY HOHENGARTEN			3 ACCOUNT # (Ethics Commission Filers)		
4 Date 10-21-61	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Edythe Michel	6 Contributor address; City; State; Zip Code 712 Sparks Austin, TX 78705	7 Amount of contribution (\$) 125.00	8 In-kind contribution description (if applicable)	
9 Contributor's principal occupation Music + Entertainment Production			10 Contributor's job title Producer		
11 Contributor's employer/law firm Loudhouse Productions			12 Law firm of contributor's spouse (if any)		
13 If contributor is a child, law firm of parent(s) (if any)					

Date 10-21-61	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Richard T. Jones	Contributor address; City; State; Zip Code 11028 Mint Julep Austin, TX 78748	Amount of contribution (\$) 125.00	In-kind contribution description (if applicable)	
Contributor's principal occupation Atty			Contributor's job title Atty		
Contributor's employer/law firm Self			Law firm of contributor's spouse (if any)		
If contributor is a child, law firm of parent(s) (if any)					

Date 10-22-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Karen Sonleitner	Contributor address; City; State; Zip Code 1712 Pasadena Dr. Austin TX 78757	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)	
Contributor's principal occupation planning & administration			Contributor's job title Senior Planner		
Contributor's employer/law firm Travis County			Law firm of contributor's spouse (if any)		
If contributor is a child, law firm of parent(s) (if any)					

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

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 23	
2 FILER NAME NANCY HOHENGARTEN		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 10-22-10	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Gunter & Bennett	7 Amount of contribution (\$) 500.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 600 W. 9th Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation law firm		10 Contributor's job title	
11 Contributor's employer/law firm		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			

Date 10-21-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: F. Scott Spears	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code PO Box 140380 Austin TX 78716		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Atty		Contributor's job title	
Contributor's employer/law firm Arenson & Spears		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

Date 10-21-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Matt Nichols	Amount of contribution (\$) 200.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1201 Rio Grande Suite 200 Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Atty		Contributor's job title Self	
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

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

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 23	
2 FILER NAME NANCY HOHENGARTEN		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 10-20-10	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Joyce Margrace	7 Amount of contribution (\$) 50.00	8 In-kind contribution description (if applicable)
6 Contributor address: City, State, Zip Code 4141 Southwest Freeway Suite 250 Houston, TX 77027		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation Atty		10 Contributor's job title Atty	
11 Contributor's employer/law firm self		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			

Date 10-25-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gus Garcia Jr.	Amount of contribution (\$) 125.00	In-kind contribution description (if applicable)
Contributor address: City, State, Zip Code 1012 Rio Gande Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Atty		Contributor's job title Atty	
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

Date 10-22-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Steve Torro	Amount of contribution (\$) 125.00	In-kind contribution description (if applicable)
Contributor address: City, State, Zip Code 404 W. 13th Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Atty		Contributor's job title Atty	
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

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

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 23	
2 FILER NAME NANCY HOHENGARTEN		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 10-27-10	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) H. Curtis Woodcock	7 Amount of contribution (\$) 125	8 In-kind contribution description (if applicable)
5 Contributor address; City; State; Zip Code PO Box 11627 Austin, TX 78711		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation Atty		10 Contributor's job title Atty	
11 Contributor's employer/law firm self		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			

Date 10-21-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilbert Martinez	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code PO Box 42436 Austin, TX 78704		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Atty		Contributor's job title Atty	
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

Date 10-25-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pamela Lancaster	Amount of contribution (\$) 125.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 316 W. 12th suite 207 Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Atty		Contributor's job title Atty	
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

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

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 23	
2 FILER NAME NANCY HOHENGARTEN		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 10-20-10	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joshua Saegent	7 Amount of contribution (\$) 100.00	8 In-kind contribution description (if applicable)
6 Contributor address: City; State; Zip Code 8156 Ceberry Dr. Austin TX 78759		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation Atty		10 Contributor's job title Atty	
11 Contributor's employer/law firm Self		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 10-21-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charles Roadman III	Amount of contribution (\$) cash 300.00 200.00	In-kind contribution description (if applicable) band for fundraiser
Contributor address: City; State; Zip Code 1307 Nueces Austin TX 78701		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Atty		Contributor's job title Atty	
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 10-21-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raymond Esperson	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address: City; State; Zip Code 316 W. 12th St, Suite 101B Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Atty		Contributor's job title Atty	
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

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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 (JUDICIAL)**

SCHEDULE A (J)

The instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 23	
2 FILER NAME NANCY HOHENGARTEN		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 10-21-10	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casey Law Firm	7 Amount of contribution (\$) 125.00	8 In-kind contribution description (if applicable)
6 Contributor address: City, State, Zip Code 8705 Shoal Creek, Ste 202 Austin, TX 78751		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation Atty		10 Contributor's job title Atty	
11 Contributor's employer/law firm Self		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			

Date 10-21-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nick Duncan	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address: City, State, Zip Code 4422 Pack Saddle Pass Austin TX 78745		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Atty		Contributor's job title Atty	
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

Date 10-21-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eva Eakin Wissen	Amount of contribution (\$) 125.00	In-kind contribution description (if applicable)
Contributor address: City, State, Zip Code 821 W. 11th Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Atty		Contributor's job title Atty	
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)** **SCHEDULE A (J)**

The instruction Guide explains how to complete this form. 1 Total pages Schedule A(J): **23**

2 FILER NAME **NANCY HOHENGARTEN** 3 ACCOUNT # (Ethics Commission Filers)

4 Date 10-21-10	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Eric J. Harron	7 Amount of contribution (\$) 50.00	8 In-kind contribution description (if applicable)
6 Contributor address: City, State, Zip Code PO Box 42104 Austin, TX 78704		(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation **Atty** 10 Contributor's job title **Atty**

11 Contributor's employer/law firm **Self** 12 Law firm of contributor's spouse (if any)

13 If contributor is a child, law firm of parent(s) (if any)

Date 10-21-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Brian Roark Law Office	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Contributor address: City, State, Zip Code 1307 West Ave Austin TX 78701		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation **Atty** Contributor's job title **Atty**

Contributor's employer/law firm **Self** Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date 10-19-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Richard Gentry	Amount of contribution (\$) 125.00	In-kind contribution description (if applicable)
Contributor address: City, State, Zip Code 700 Lavaca, Suite 1010 Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation **Atty** Contributor's job title **Atty**

Contributor's employer/law firm **Self** Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 23	
2 FILER NAME NANCY HOHENGARTEN		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 10-21-10	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sandra Ritz	7 Amount of contribution (\$) 125.00	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 902 Rio Grande Austin TX 78701		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation Atty		10 Contributor's job title Atty	
11 Contributor's employer/law firm Self		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			

Date 10-21-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jodi Cole	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 2011 Eaton Lane Austin TX 78723		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Atty		Contributor's job title Atty	
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

Date 10-21-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C. Bryan Case	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 3139 Montwood Trail Austin, TX 78748		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Atty		Contributor's job title Asst. DA	
Contributor's employer/law firm TransCo. DA		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

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

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 23	
2 FILER NAME NANCY HOHENGARTEN		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 10-21-10	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Richard Hoffman	7 Amount of contribution (\$) 250.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 611 S. Congress, Suite 210 Austin TX 78704		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation Atty		10 Contributor's job title Atty	
11 Contributor's employer/law firm Self		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			

Date 10-21-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Meredith Troberman	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 404 W. 13th Austin TX 78701		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Atty		Contributor's job title Atty	
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

Date 10-21-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Amber Elliott	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1524 S. IH 35 Suite 232 Austin, TX 78704		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Atty		Contributor's job title Atty	
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 23	
2 FILER NAME NANCY HOHENGARTEN		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 10-21-10	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Chris Dorbandt	7 Amount of contribution (\$) 200.00	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 603 W. 12th Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation Atty		10 Contributor's job title Atty	
11 Contributor's employer/law firm SELF		12 Law firm of contributor's spouse (if any)	

13 If contributor is a child, law firm of parent(s) (if any)

Date 10-21-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Larry Saver	Amount of contribution (\$) 150.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 1004 West Ave Austin TX 78701		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Atty		Contributor's job title Atty	
Contributor's employer/law firm SELF		Law firm of contributor's spouse (if any)	

If contributor is a child, law firm of parent(s) (if any)

Date 10-21-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Carla Cristford	Amount of contribution (\$) 125.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code PO Box 3446 Austin TX 78764		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Atty		Contributor's job title Atty	
Contributor's employer/law firm SELF		Law firm of contributor's spouse (if any)	

If contributor is a child, law firm of parent(s) (if any)

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

PLEGGED CONTRIBUTIONS (JUDICIAL)

SCHEDULE B (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule B(J):	
2 FILER NAME <i>NANCY HOHENGARTEN</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED PLEDGES: ⇒ ⇒ ⇒ ⇒ ⇒ ⇒		\$ <i>500</i>	
5 Date <i>10-20-10</i>	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Bill Hines</i>	8 Amount of pledge (\$) <i>500.00</i>	9 In-kind description (if applicable)
7 Pledgor address; City; State; Zip Code <i>1307 Nueces Austin TX 78701</i>		(If travel outside of Texas, complete Schedule T)	
10 Pledgor's principal occupation <i>Atty</i>		11 Pledgor's job title <i>Atty</i>	
12 Pledgor's employer/law firm <i>Hines, Ranc & Holub</i>		13 Law firm of pledgor's spouse (if any)	
14 If pledgor is a child, law firm of parent(s) (if any)			

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)			
Pledgor's principal occupation		Pledgor's job title	
Pledgor's employer/law firm		Law firm of pledgor's spouse (if any)	
If pledgor is a child, law firm of parent(s) (if any)			

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)			
Pledgor's principal occupation		Pledgor's job title	
Pledgor's employer/law firm		Law firm of pledgor's spouse (if any)	
If pledgor is a child, law firm of parent(s) (if any)			

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

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 13	2 FILER NAME NANCY HOHENGARTEN	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 12-8-10	5 Payee name Corazon Restaurant
--------------------------	---

6 Amount (\$) 136.92	7 Payee address; City; State; Zip Code 1101 West 5th St. Austin, TX 78703
--------------------------------	---

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Gift	(b) Description (If travel outside of Texas, complete Schedule T) Staff Birthday Lunch
--------------------------	---	--

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

Date 12-6-10	Payee name Artworks Gallery
------------------------	---------------------------------------

Amount (\$) 348.22	Payee address; City; State; Zip Code 1214 W. 6th, Suite 105 Austin, TX 78703
------------------------------	--

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other	Description (If travel outside of Texas, complete Schedule T) Framing Courtroom/Chambers
------------------------	--	--

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

Date 12-6-10	Payee name Groupon / Austin Comucopia
------------------------	---

Amount (\$) 35.00	Payee address; City; State; Zip Code 600 W. Chicago Ave, Suite 620 Chicago IL 60654
-----------------------------	---

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Gift	Description (If travel outside of Texas, complete Schedule T) Holiday gift for Court Admin
------------------------	---	--

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

Date 12-2-10	Payee name Buenas Aires Cafe
------------------------	--

Amount (\$) 33.00	Payee address; City; State; Zip Code 1201 E. 6th Austin, TX 78702
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Gift	Description (If travel outside of Texas, complete Schedule T) Staff Birthday Lunch
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

553 11

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: <i>13</i>	2 FILER NAME <i>NANCY HOHENGARTEN</i>	3 ACCOUNT # (Ethics Commission Filers)
4 Date <i>8-23-10</i>	5 Payee name <i>South Austin Democrats</i>	
6 Amount (\$) <i>50.00</i>	7 Payee address; City; State; Zip Code <i>PO Box 152 592 Austin TX 78715</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Event</i>	(b) Description (If travel outside of Texas, complete Schedule T) <i>Yeller Dang Democrats</i>
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date <i>8-30-10</i>	Payee name <i>Peter Staats</i>	
Amount (\$) <i>200.00</i>	Payee address; City; State; Zip Code <i>1150 San Bernard Austin, TX 78702</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Fee</i>	Description (If travel outside of Texas, complete Schedule T) <i>Photography</i>
	Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date <i>8-30-10</i>	Payee name <i>Hispanic Bar Assoc. Charitable Foundation</i>	
Amount (\$) <i>50.00</i>	Payee address; City; State; Zip Code <i>PO Box 12692 Austin TX 78712</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Event</i>	Description (If travel outside of Texas, complete Schedule T) <i>Annual Banquet</i>
	Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date <i>9-7-10</i>	Payee name <i>West Austin Democrats</i>	
Amount (\$) <i>10.00</i>	Payee address; City; State; Zip Code <i>PO Box 50064 Austin, TX 78763</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>fee</i>	Description (If travel outside of Texas, complete Schedule T) <i>membership dues</i>
	Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials Expense | Salaries/Wages/Contract Labor | Loan Repayment/Reimbursement |
| Accounting/Banking | Legal Services | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Travel In District | Contributions/Donations Made By |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| Fees | Printing Expense | Office Overhead/Rental Expense | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 13	2 FILER NAME NANCY HOHENGARTEN	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 7-12-10	5 Payee name Austin Tejano Democrats
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6 Amount (\$) 20.00	7 Payee address; City; State; Zip Code 2544 Stoutwood Circle Austin, TX 78745
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) membership dues
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 7-28-10	Payee name University Democrats
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Amount (\$) 50.00	Payee address; City; State; Zip Code SOC # 145 100C Dean Keeton Austin TX 78712
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Gift	Description (If travel outside of Texas, complete Schedule T) Annual Donation
------------------------	---	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 8-17-10	Payee name Austin AFL CIO Council
------------------------	---

Amount (\$) \$145	Payee address; City; State; Zip Code PO Box 301074 Austin, TX 78703
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) Labor Day Booklet
------------------------	--	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 8-19-10	Payee name Diana Kern
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Amount (\$) 100.00	Payee address; City; State; Zip Code 237 Lonesome Dove Cedar Creek, TX 78612
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Gift/Award	Description (If travel outside of Texas, complete Schedule T) Hats for Project Recovery graduates
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials Expense | Salaries/Wages/Contract Labor | Loan Repayment/Reimbursement |
| Accounting/Banking | Legal Services | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Travel In District | Contributions/Donations Made By |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| Fees | Printing Expense | Office Overhead/Rental Expense | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 13	2 FILER NAME NANCY HOHENGARTEN	3 ACCOUNT # (Ethics Commission Filers)
4 Date 9-10-10	5 Payee name Texas Center for the Judiciary	
6 Amount (\$) 40.00	7 Payee address; City; State; Zip Code 1210 San Antonio, Suite 800 Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event	(b) Description (If travel outside of Texas, complete Schedule T) NAWJ Dinner
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 9-10-10	Payee name The Conference Fund (3rd Judicial District)	
Amount (\$) 10.00	Payee address; City; State; Zip Code 405 MLK, Box 9 Georgetown, TX 78626	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event	Description (If travel outside of Texas, complete Schedule T) Judge's Conf. Reception
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10-9-10	Payee name Blue Roots Campaign	
Amount (\$) 50.00	Payee address; City; State; Zip Code PO Box 30653 Austin TX 78703	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T) Email set up
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10-13-10	Payee name Austin BBQ - David Terrell	
Amount (\$) 500.00	Payee address; City; State; Zip Code 2600 Howellwood Way Austin TX 78708	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage	Description (If travel outside of Texas, complete Schedule T) 10/21/10 Fundraiser
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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600

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 13	2 FILER NAME NANCY HOHENGARTEN	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 10-15-10	5 Payee name Capitol Tents
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6 Amount (\$) 581.30	7 Payee address; City; State; Zip Code 1800 So. Lamar Austin, TX 78704
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Solicitation / Fundraising	(b) Description (If travel outside of Texas, complete Schedule T) 10-21-10 Fundraiser Tent
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10-21-10	Payee name Two Tons of Steel
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Amount (\$) 900.00	Payee address; City; State; Zip Code 40 Davis McLarty Agency 708 So. Lamar, Suite D, Austin, TX 78704
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Solicitation / Fundraising	Description (If travel outside of Texas, complete Schedule T) MUSIC for 10/21/10
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10-21-10	Payee name Austin BBQ David Terrell
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Amount (\$) 200.00	Payee address; City; State; Zip Code 2600 Howellwood Way Austin, TX 78748
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage	Description (If travel outside of Texas, complete Schedule T) 10/21/10 Fundraiser
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10-23-10	Payee name Travis Co. Democratic Party
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Amount (\$) 11400.00	Payee address; City; State; Zip Code 1311 East 6th St, Suite B Austin, TX 78702
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Election Contribution
------------------------	---	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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3081.30

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials Expense | Salaries/Wages/Contract Labor | Loan Repayment/Reimbursement |
| Accounting/Banking | Legal Services | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Travel In District | Contributions/Donations Made By |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| Fees | Printing Expense | Office Overhead/Rental Expense | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 13	2 FILER NAME NANCY HOHENGARTEN	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 10/20/10	5 Payee name Costco
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6 Amount (\$) 158.48	7 Payee address; City; State; Zip Code # 10401 Research Blvd Austin, TX 78759
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Solicitation/Fundraising	(b) Description (If travel outside of Texas, complete Schedule T) Food for 10/21 fundraiser paper goods
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10-21-10	Payee name Twin Liquors
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Amount (\$) 55.14	Payee address; City; State; Zip Code 1000 E. 41ST #210 Austin, TX 78751
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage	Description (If travel outside of Texas, complete Schedule T) 10-21-10 fundraiser
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10-21-10	Payee name Fedex Office
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Amount (\$) 4.88	Payee address; City; State; Zip Code 2901 Medical Arts St Austin TX 78705
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Solicitation/Fundraising	Description (If travel outside of Texas, complete Schedule T) Posters
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10-31-10	Payee name US Post Office
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Amount (\$) 7.92	Payee address; City; State; Zip Code 4300 Speedway, No Austin Station Austin TX 78705
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other-Office Supplies	Description (If travel outside of Texas, complete Schedule T) stamps
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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226.42

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials Expense | Salaries/Wages/Contract Labor | Loan Repayment/Reimbursement |
| Accounting/Banking | Legal Services | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Travel In District | Contributions/Donations Made By |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| Fees | Printing Expense | Office Overhead/Rental Expense | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 13	2 FILER NAME NANCY HOHENGARTEN	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 10-26-10	5 Payee name US Post office
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6 Amount (\$) 23.76	7 Payee address; City; State; Zip Code 421 8th Ave NYC NY
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other	(b) Description (If travel outside of Texas, complete Schedule T) stamps
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10-25-10	Payee name Tiff's Treats
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Amount (\$) 50.65	Payee address; City; State; Zip Code 1806 Nueces St Austin, TX 78701
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Gift	Description (If travel outside of Texas, complete Schedule T) Hostess of 10/21/10 Event
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10-22-10	Payee name New Milestone Foundation
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Amount (\$) 100.00	Payee address; City; State; Zip Code 1430 Collier St Austin, TX 78704
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Gift	Description (If travel outside of Texas, complete Schedule T) Donation for Crisis Respite Facility
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10-21-10	Payee name Junior's Beert + Wine
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Amount (\$) 15.14	Payee address; City; State; Zip Code 705 W. 29th Austin, TX 78705
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Solicitation/Fundraising	Description (If travel outside of Texas, complete Schedule T) Ice
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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189.57

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 13		2 FILER NAME NANCY HOHENGARTEN		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 10.21.10		5 Payee name Vertical Response			
6 Amount (\$) 8.62		7 Payee address; City; State; Zip Code 501 2nd St, Suite 700 San Francisco CA 94107			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Solicitation/Fundraising		(b) Description (If travel outside of Texas, complete Schedule T) Email	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10-18-10		Payee name Trans Co. Democratic Party			
Amount (\$) 100.00		Payee address; City; State; Zip Code 1311 E. 6th St Suite B Austin TX 78702			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) Party @ St. Cecilia Hotel	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10-7-10		Payee name Vertical Response			
Amount (\$) 15.00		Payee address; City; State; Zip Code 501 2nd St., Suite 700 San Francisco, CA 94107			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Solicitation/Fundraising		Description (If travel outside of Texas, complete Schedule T) Email	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10-6-10		Payee name US Post Office			
Amount (\$) 15.84		Payee address; City; State; Zip Code No. Austin Station Austin, TX 78705 4300 Speedway			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Other		Description (If travel outside of Texas, complete Schedule T) Stamps	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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139.46

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 13	2 FILER NAME NANCY HOKENGARTEN	3 ACCOUNT # (Ethics Commission Filers)
4 Date 10-4-10	5 Payee name Blue Dahlia Restaurant	
6 Amount (\$) 26.84	7 Payee address; City; State; Zip Code 1115 E. 11th Austin, TX 78702	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beveridge	(b) Description (If travel outside of Texas, complete Schedule T) planning lunch for event
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 9-13-10	Payee name Costco	
Amount (\$) 44.91	Payee address; City; State; Zip Code 10401 Research Blvd Austin TX 78759	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beveridge	Description (If travel outside of Texas, complete Schedule T) Chambers/Jury Room
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11-16-10	Payee name Corazon	
Amount (\$) 66.07	Payee address; City; State; Zip Code 1105 W. 5th St Austin, TX 78703	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Gift	Description (If travel outside of Texas, complete Schedule T) Luncheon Court Reporter birthday
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11-19-10	Payee name Artworks Gallery Austin	
Amount (\$) 835.74	Payee address; City; State; Zip Code 1214 W. 6th Suite 105 Austin, TX 78703	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other	Description (If travel outside of Texas, complete Schedule T) Framing Courtroom & Chambers
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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973.56

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 13	2 FILER NAME NANCY HOHENGARTEN	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 11-18-10	5 Payee name ACE - A Community for Education
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6 Amount (\$) 100.00	7 Payee address; City; State; Zip Code 1616 Guadalupe, suite 3, 206 Austin TX 78701
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Gift	(b) Description (If travel outside of Texas, complete Schedule T) fundraising luncheon
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11-17-10	Payee name Leadership Austin
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Amount (\$) 150.00	Payee address; City; State; Zip Code 1609 Shoal Creek, Suite 202 Austin TX 78701
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other	Description (If travel outside of Texas, complete Schedule T) membership + scholarship donation
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11-21-10	Payee name University Democrats
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Amount (\$) 106.00	Payee address; City; State; Zip Code SOC # 145 100-C West Dean Keeton St, Austin, TX 78712
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) Fundraiser for UDEMAS
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 13	2 FILER NAME NANCY HOHENGARTEN	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 12-16-10	5 Payee name Shoreline Grill
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6 Amount (\$) 121.48	7 Payee address; City; State; Zip Code 98 San Jacinto Blvd Austin TX 78701
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Gift	(b) Description (If travel outside of Texas, complete Schedule T) Holiday lunch for staff
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12-31-10	Payee name Target
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Amount (\$) 12-31-10 51.68	Payee address; City; State; Zip Code 10107 Research Austin, TX 78759
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other - Office Supplies	Description (If travel outside of Texas, complete Schedule T) jury supplies
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12-31-10	Payee name Costco
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Amount (\$) 158.53	Payee address; City; State; Zip Code 10401 Research Blvd Austin TX 78759
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other - Office Supplies	Description (If travel outside of Texas, complete Schedule T) jury/chambers supplies
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12-8-10	Payee name Costco
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Amount (\$) 56.60	Payee address; City; State; Zip Code 10401 Research Blvd Austin TX 78759
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other - Office Supplies	Description (If travel outside of Texas, complete Schedule T) jury/chambers supplies
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

388.29

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials Expense | Salaries/Wages/Contract Labor | Loan Repayment/Reimbursement |
| Accounting/Banking | Legal Services | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Travel In District | Contributions/Donations Made By |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| Fees | Printing Expense | Office Overhead/Rental Expense | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: <i>13</i>	2 FILER NAME <i>NANCY HOTHENBARTEN</i>	3 ACCOUNT # (Ethics Commission Filers)
4 Date <i>12-15-10</i>	5 Payee name <i>Anna Marie DeLaRosa</i>	
6 Amount (\$) <i>\$100.00</i>	7 Payee address; City; State; Zip Code <i>PO Box 1748 Austin TX 78767</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Gift</i>	(b) Description (If travel outside of Texas, complete Schedule T) <i>Staff Holiday</i>
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <i>J</i> Office held
Date <i>12-13-10</i>	Payee name <i>NAMI Austin</i>	
Amount (\$) <i>50.00</i>	Payee address; City; State; Zip Code <i>4110 Guadalupe St. Blag. 781, Room 419 Austin, TX 78751</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Other</i>	Description (If travel outside of Texas, complete Schedule T) <i>membership dues</i>
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <i>7-12-10</i>	Payee name <i>Costco</i>	
Amount (\$) <i>13.45</i>	Payee address; City; State; Zip Code <i>10401 Research Blvd Austin TX 78759</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Other</i>	Description (If travel outside of Texas, complete Schedule T) <i>jury/office supplies</i>
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <i>7-21-10</i>	Payee name <i>USAA/Harland Clarke</i>	
Amount (\$) <i>19.95</i>	Payee address; City; State; Zip Code <i>10750 Mc Dermott Freeway San Antonio TX 78284</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Accounting/Banking</i>	Description (If travel outside of Texas, complete Schedule T) <i>checks</i>
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

183.40

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 13	2 FILER NAME NANCY HOHENGARTEN	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 11-23-10	5 Payee name Fete Accompli
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6 Amount (\$) 97.32	7 Payee address; City; State; Zip Code 917 W. 12th St Austin TX 78701
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other	(b) Description (If travel outside of Texas, complete Schedule T) lunch for judges mtg
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12-15-10	Payee name Kristen Meitzen
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Amount (\$) 100.00	Payee address; City; State; Zip Code PO Box 1748 Austin TX 78767
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Gift	Description (If travel outside of Texas, complete Schedule T) Staff Holiday
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12-15-10	Payee name Shonna Castillo
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Amount (\$) 100.00	Payee address; City; State; Zip Code PO Box 1748 Austin TX 78767
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Gift	Description (If travel outside of Texas, complete Schedule T) Staff Holiday
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12-15-10	Payee name Walter Poston
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Amount (\$) 100.00	Payee address; City; State; Zip Code PO Box 1748 Austin, TX 78767
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Gift	Description (If travel outside of Texas, complete Schedule T) Staff Holiday
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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347.32