

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

7604

FORM C/OH
COVER SHEET PG 1

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

1 ACCOUNT #
(Ethics Commission filers)
12312005

2 PAGE #
1 of 36

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR FIRST MI
RON
NICKNAME LAST SUFFIX
DAVIS

OFFICE USE ONLY

Date Received
2011 JUL 13 PM 12:13
DAVID L. CRAWFORD
COUNTY CLERK
TRAVIS COUNTY TEXAS
FILED FOR RECORD

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
P.O. Box 16665
Austin, TX 78761

Change of Address

Date Hand-delivered or Date Postmarked

Receipt # Amount

5 CAMPAIGN TREASURER NAME

MS / MRS / MR FIRST MI
Louis
NICKNAME LAST SUFFIX
Simms

Date Processed

Date Imaged

6 CAMPAIGN TREASURER ADDRESS
(Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
7501 Barcelona Drive
Austin, TX 78752-2006

7 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION
(512) 453-5509

8 REPORT TYPE

January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only)
 July 15 8th day before election Exceeded \$500 limit Final report (Attach C/OH - FR)

9 PERIOD COVERED

Month Day Year THROUGH Month Day Year
01/01/2011 06/30/2011

10 ELECTION

ELECTION DATE ELECTION TYPE
Month Day Year
11/06/2012 Primary Runoff General Special

11 OFFICE

OFFICE HELD (if any)
Travis CO Commissioner Pct 1

12 OFFICE SOUGHT (if known)
Travis CO Commissioner Pct 1

13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS

.. Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ..

Name

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

additional pages

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME DAVIS, RON

15 ACCOUNT # (Ethics Commission filers)
12312005

16 NOTICE FROM POLITICAL COMMITTEE(S)

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

17 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$ 5.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 30,885.00

EXPENDITURE TOTALS

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

4. TOTAL POLITICAL EXPENDITURES \$ 11,519.96

CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 56,081.08

OUTSTANDING LOAN TOTALS

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

18 AFFIDAVIT

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



AFFIX NOTARY STAMP / SEAL ABOVE

Ron Davis
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Ron Davis, this the 13th day of July, 20 11, to certify which, witness my hand and seal of office.

Felicitas B. Chavez
Signature of officer administering oath

Felicitas B. Chavez
Print name of officer administering oath

Notary Public
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/18 Report: 3/36	
2 FILER NAME DAVIS, RON		3 ACCOUNT # (Ethics Commission filers) 12312005	
4 Date 02/11/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ace Printing - Stacy Suite 6 Contributor address; City; State; Zip Code 7807 Doncaster Austin, TX 78745	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 05/11/2011	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID# C00011114) American Federation of State County Municipal Employee PEOPLE Contributor address; City; State; Zip Code 1625 L St. N.W. Washington, DC 20036	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/21/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Angelou, Nicholas Contributor address; City; State; Zip Code 8801 Golden Rain Austin, TX 78735	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/23/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Armbrust & Brown, L.L.P. Contributor address; City; State; Zip Code 100 Congress Ave., Suite 1300 Austin, TX 78701-2744	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 04/30/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Austin Board of Realtors, Political Action Committee N Contributor address; City; State; Zip Code 4106 Medical Parkway Austin, TX 78756-3700	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/18 Report: 4/36	
2 FILER NAME DAVIS, RON		3 ACCOUNT # (Ethics Commission filers) 12312005	
4 Date 05/25/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Balanoff, Dr. Howard & Marilyn 6 Contributor address; City; State; Zip Code 10910 Sierra Colorado Austin, TX 78759	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 05/03/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Blazer, Emily Deering Contributor address; City; State; Zip Code 6103 Cary Dr. Austin, TX 78757	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 05/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bosse, Donald Eugene Contributor address; City; State; Zip Code 1102 Silver Hill Dr. Austin, TX 78746	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 05/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bourgeois, Gregory T. & Naomi Val Contributor address; City; State; Zip Code 1700 Bridgeway Drive Austin, TX 78704	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 05/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bowser, Cheryl Contributor address; City; State; Zip Code 2302 Balboa Rd. Austin, TX 78733	Amount of contribution (\$) \$10.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/18 Report: 8/36	
2 FILER NAME DAVIS, RON		3 ACCOUNT # (Ethics Commission filers) 12312005	
4 Date 05/04/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dawson, Rhett M. 6 Contributor address; City; State; Zip Code 4409 Sacred Arrow Dr. Austin, TX 78735-6363	7 Amount of contribution (\$) \$125.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 05/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dawson, Rhett M. Contributor address; City; State; Zip Code 4409 Sacred Arrow Dr. Austin, TX 78735-6363	Amount of contribution (\$) \$125.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 04/27/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Doyle, John E. Contributor address; City; State; Zip Code 2012 Northridge Dr. Austin, TX 78723	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 05/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dukette, Scott E. Contributor address; City; State; Zip Code 4410 Twisted Tree Drive Austin, TX 78735-6432	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 05/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dwyer, Peter A. Contributor address; City; State; Zip Code 9900 Hwy 290 East Manor, TX 78653-9720	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/18 Report: 10/36	
2 FILER NAME DAVIS, RON		3 ACCOUNT # (Ethics Commission filers) 12312005	
4 Date 05/11/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Evans, Hurbert 6 Contributor address; City; State; Zip Code 1302 West avenue Austin, TX 78701-1716	7 Amount of contribution (\$) \$150.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 05/11/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gonzales, Hector 6 Contributor address; City; State; Zip Code 20125 FM969 Webberville, TX 78653-5318	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 03/25/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Graham, Charles W. (Dr.) 6 Contributor address; City; State; Zip Code P.O. Box 468 Elgin, TX 78621-4833	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 05/04/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gregory, Bob & Kay 6 Contributor address; City; State; Zip Code 2939 Westlake Cove Austin, TX 78746	7 Amount of contribution (\$) \$1,000.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 05/11/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Haff Associates State Political Action Committee 6 Contributor address; City; State; Zip Code 1201 North Bowser Rd. Richardson, TX 75081	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 9/18 Report: 11/36

2 FILER NAME DAVIS, RON

3 ACCOUNT # (Ethics Commission filers)

12312005

4 Date

05/11/2011

5 Full name of contributor out-of-state PAC (ID# _____)
Hammond, Granville Clarke

6 Contributor address; City; State; Zip Code
403 Chaparral Rd.
Austin, TX 78745

7 Amount of contribution (\$)

\$25.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

04/27/2011

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

Contributor address; City; State; Zip Code
5603 Overbrook Dr.
Austin, TX 78723-4724

Amount of contribution (\$)

\$125.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/03/2011

Full name of contributor out-of-state PAC (ID# _____)
Hemphill, Clayton Thomas & Shirley

Contributor address; City; State; Zip Code
3208 Dale Lane
Dale, TX 78616-2521

Amount of contribution (\$)

\$25.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/11/2011

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

Contributor address; City; State; Zip Code
8831 Stable Lane
Houston, TX 77024-5674

Amount of contribution (\$)

\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/11/2011

Full name of contributor out-of-state PAC (ID# _____)
Hernandez, Sally J.

Contributor address; City; State; Zip Code
2712 Bobby Lane
Austin, TX 78724

Amount of contribution (\$)

\$25.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 10/18 Report: 12/36	
2 FILER NAME DAVIS, RON		3 ACCOUNT # (Ethics Commission filers) 12312005	
4 Date 05/11/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hicks, Renea & Susan 6 Contributor address; City; State; Zip Code 4112 Ramsey Ave. Austin, TX 78756-3511	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 05/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jack W. Gullahorn, P.C. Contributor address; City; State; Zip Code P.O. Box 140045 Austin, TX 78714	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 05/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jones, Marie Marguerite Contributor address; City; State; Zip Code 2407 15th St. NW, Apt. 201 Washington, DC 20009	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 05/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kendall, Joseph Contributor address; City; State; Zip Code 801 W. Gibson St. Austin, TX 78701	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 04/27/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kohler, Ann T. Contributor address; City; State; Zip Code 3902 Idlewild Austin, TX 78731	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 11/18 Report: 13/36	
2 FILER NAME DAVIS, RON		3 ACCOUNT # (Ethics Commission filers) 12312005	
4 Date 05/11/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lee, Flynn 6 Contributor address; City; State; Zip Code P.O. Box 202 Austin, TX 78767	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 05/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lloyd, John S. Contributor address; City; State; Zip Code 4111 Lakeplace Lane Austin, TX 78763	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lloyd Doggett State Account Contributor address; City; State; Zip Code P.O. Box 5843 Austin, TX 78763	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/30/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lorenz, Perry Contributor address; City; State; Zip Code 1311-A East 6th Street Austin, TX 78702-3301	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Love, Capt. Kenneth L. & Patricia A. Contributor address; City; State; Zip Code 122 Edison Dr. Hutto, TX 78634	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 12/18 Report: 14/36

2 FILER NAME DAVIS, RON

3 ACCOUNT # (Ethics Commission filers)
12312005

4 Date **5** Full name of contributor out-of-state PAC (ID# _____)
05/03/2011 Magee, Blake & Ana

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

6 Contributor address; City; State; Zip Code
1400 Elton Lane
Austijn, TX 78703

\$250.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

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

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

05/10/2011 Mather, Jean Allen
Contributor address; City; State; Zip Code
1611 Alameda Dr.
Austin, TX 78704-3103

\$20.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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

05/11/2011 Mehta, Hiren
Contributor address; City; State; Zip Code
2421 Westcreek Lane
Houston, TX 77027

\$2,500.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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

05/10/2011 Murfee, George W.
Contributor address; City; State; Zip Code
2601 Valasquez
Austin, TX 78703

\$500.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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

05/11/2011 Nabers, Mary Scott
Contributor address; City; State; Zip Code
901 S. MoPac Expressway
Barton Oaks Plaza 1, Suite 100
Austin, TX 78746

\$250.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 13/18 Report: 15/36	
2 FILER NAME DAVIS, RON		3 ACCOUNT # (Ethics Commission filers) 12312005	
4 Date 05/11/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nellis, Leroy W. 6 Contributor address; City; State; Zip Code 3418 Zaddock Woods Dr. Austin, TX 78749	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 05/10/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nias, James M. Contributor address; City; State; Zip Code 1116 Reagan Terrace Austin, TX 78704	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 04/23/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Olvera, Snow & Hope M. Jr. Contributor address; City; State; Zip Code 12132 Parsons Rd. Manor, TX 78653-5221	Amount of contribution (\$) \$75.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 04/30/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Overton, Linda Contributor address; City; State; Zip Code 801 W. Gibson St. Austin, TX 78704	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 05/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pasar Public affairs Consulting LLP Contributor address; City; State; Zip Code 2313 Lake Austin Blvd., Ste. 204 Austin, TX 78703-4545	Amount of contribution (\$) \$125.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 14/18 Report: 16/36

2 FILER NAME DAVIS, RON

3 ACCOUNT # (Ethics Commission filers)
12312005

4 Date **5** Full name of contributor out-of-state PAC (ID# _____)
05/04/2011 Peruzzi, William A.

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

6 Contributor address; City; State; Zip Code
7931 Jenkin Rd.
Cheltenham, PA 19012

\$1,000.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
05/20/2011 Poplin, Phillip G.

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

Contributor address; City; State; Zip Code
3202 Lafayette Avenue
Austin, TX 78722-2226

\$75.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
05/11/2011 Prager, III, Herman J.

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

Contributor address; City; State; Zip Code
8600 Ranch Rd. 620 N. Apt 210
Austin, TX 78726

\$30.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
05/11/2011 Pryor, Scott

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

Contributor address; City; State; Zip Code
1621 Enfield Rd, Unit C
Austin, TX 78703

\$1,000.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
05/11/2011 Riley, Chris

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

Contributor address; City; State; Zip Code
1310 San Antonio St. Apt. 1
Austin, TX 78701

\$25.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 16/18 Report: 18/36	
2 FILER NAME DAVIS, RON		3 ACCOUNT # (Ethics Commission filers) 12312005	
4 Date 04/27/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shapiro, Dave 6 Contributor address; City; State; Zip Code 1801 Rio Grande Apt. 101 Austin, TX 78701	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 04/28/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Siff, Theodore J. Contributor address; City; State; Zip Code 604 West 11th Street Austin, TX 78701	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 05/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sisson, John C. Contributor address; City; State; Zip Code 603 Davis Street #1905 Austin, TX 78701	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 05/20/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith,, Craig Contributor address; City; State; Zip Code 1908 Barton PKWY Austin, TX 78704	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 04/27/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stone, Keith & Catherine Contributor address; City; State; Zip Code 4716 St. John's Dr. Dallas, TX 75205	Amount of contribution (\$) \$2,500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 17/18 Report: 19/36	
2 FILER NAME DAVIS, RON		3 ACCOUNT # (Ethics Commission filers) 12312005	
4 Date 05/03/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tapp, Frances C 6 Contributor address; City; State; Zip Code P.O. Box 60010 Corpus Christi, TX 78466	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 06/09/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Travis County Sheriffs Law Enforcement Association PAC Contributor address; City; State; Zip Code 8600 Ranch Road 620 N Apt 210 Austin, TX 78726	Amount of contribution (\$) \$2,500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/30/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Travis County Sheriff's Officers Association, PAC Contributor address; City; State; Zip Code 400 W 14th St. Suite #220 Austin, TX 78701	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Vinson & Elkins Texas, Political Action Committee Contributor address; City; State; Zip Code 2300 Frist City Tower Houston, TX 77002-6760	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Washington, Milton G. Contributor address; City; State; Zip Code 11500 Oak TRL Austin, TX 78753	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 18/18 Report: 20/36

2 FILER NAME DAVIS, RON

3 ACCOUNT # (Ethics Commission filers)
12312005

4 Date **5** Full name of contributor out-of-state PAC (ID# _____)
05/11/2011 Williams, John A.

6 Contributor address; City; State; Zip Code
19221 Lockwood Rd.
Manor, TX 78653

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

\$25.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/16 Report: 21/36	2 FILER NAME DAVIS, RON	3 ACCOUNT # (TEC filers) 12312005
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4 Date 05/04/2011	5 Payee name Alfred Stanley and Associates
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6 Amount (\$) \$13.16	7 Payee address City; State; Zip Code P.O. Box 5674 Austin, TX 78763
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Reimbursed Alfred Stanley & Associates for Postal Service stamps to mail fund-raising letters
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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 05/10/2011	Payee name Alfred Stanley and Associates
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Amount (\$) \$10.00	Payee address City; State; Zip Code P.O. Box 5674 Austin, TX 78763
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Reimbursed Alfred Stanley & Associates for drinks at threadgill's for musicians at fund-raiser
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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 05/10/2011	Payee name Alfred Stanley and Associates
--------------------	---

Amount (\$) \$54.68	Payee address City; State; Zip Code P.O. Box 5674 Austin, TX 78763
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Reimbursed Alfred Stanley & Associates for paying Vertical Response for emailing 4,128 emails
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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 05/11/2011	Payee name Alfred Stanley and Associates
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Amount (\$) \$105.73	Payee address City; State; Zip Code P.O. Box 5674 Austin, TX 78763
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Reimbursed Alfred Stanley & Associates for cake & candles purchased from Russell's Bakery
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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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 2/16 Report: 22/36	2 FILER NAME DAVIS, RON	3 ACCOUNT # (TEC filers) 12312005
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4 Date 05/13/2011	5 Payee name Alfred Stanley and Associates
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6 Amount (\$) \$75.00	7 Payee address City; State; Zip Code P.O. Box 5674 Austin, TX 78763
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor for raising campaign contributions
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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 05/20/2011	Payee name Alfred Stanley and Associates
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Amount (\$) \$82.82	Payee address City; State; Zip Code P.O. Box 5674 Austin, TX 78763
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Reimbursed Alfred Stanley & Associates fund-raising sponsor sign from Barringer Document
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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 05/24/2011	Payee name Alfred Stanley and Associates
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Amount (\$) \$3,909.00	Payee address City; State; Zip Code P.O. Box 5674 Austin, TX 78763
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor for raising campaign contributions
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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 06/13/2011	Payee name Alfred Stanley and Associates
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Amount (\$) \$172.50	Payee address City; State; Zip Code P.O. Box 5674 Austin, TX 78763
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor for raising campaign contributions
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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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 3/16 Report: 23/36	2 FILER NAME DAVIS, RON	3 ACCOUNT # (TEC filers) 12312005
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4 Date 06/17/2011	5 Payee name Alfred Stanley and Associates
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6 Amount (\$) \$375.00	7 Payee address City; State; Zip Code P.O. Box 5674 Austin, TX 78763
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor for raising campaign contributions
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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 03/07/2011	Payee name Allan Elementary School
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Amount (\$) \$100.00	Payee address City; State; Zip Code 4900 Gonzales Street Austin, TX 78702
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Donation to the CATCH program that promotes physical activity and healthy food choices.
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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 05/03/2011	Payee name Austin Empty Bowl Project's Kid's Cafe
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Amount (\$) \$100.00	Payee address City; State; Zip Code P.O. Box 49051 Austin, TX 78765
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Donation for hot meal, tutoring and a safe place for school age children
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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 03/30/2011	Payee name Ballet East Dance Company
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Amount (\$) \$100.00	Payee address City; State; Zip Code 311 Garwood Street Austin, TX 78702
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Donation for support free dance classes in local schools
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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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 4/16 Report: 24/36	2 FILER NAME DAVIS, RON	3 ACCOUNT # (TEC filers) 12312005
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4 Date 05/11/2011	5 Payee name BBA Management And Booking
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6 Amount (\$) \$600.00	7 Payee address City; State; Zip Code 12400 Hwy. 71 W. Suite 350-177 Austin, TX 78738
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Supplied live music for may 11, 2011 fund-raiser at Threadgill's
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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 05/05/2011	Payee name Bestline Communications, LP
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Amount (\$) \$35.61	Payee address City; State; Zip Code 500 Capital of Texas Highway Building 8, Suite 200 Austin, TX 78746-3325
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OTHER - Phone Service	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Virtual phone line for Ron Davis Campaign
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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 05/26/2011	Payee name Bestline Communications, LP
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Amount (\$) \$11.63	Payee address City; State; Zip Code 500 Capital of Texas Highway Building 8, Suite 200 Austin, TX 78746-3325
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OTHER - Phone Serve	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Virtual phone line for Ron Davis campaign
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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 06/27/2011	Payee name Bestline Communications, LP
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Amount (\$) \$11.63	Payee address City; State; Zip Code 500 Capital of Texas Highway Building 8, Suite 200 Austin, TX 78746-3325
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OTHER - Phone	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Virtual phone line for Ron davis campaign
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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**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 5/16 Report: 25/36		2 FILER NAME DAVIS, RON		3 ACCOUNT # (TEC filers) 12312005	
4 Date 04/06/2011		5 Payee name Black Austin Democrats			
6 Amount (\$) \$125.00		7 Payee address City; State; Zip Code P.O. Box 212 Austin, TX 78767			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political Donation	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 04/19/2011		Payee name Central Area Progressive Democrats			
Amount (\$) \$100.00		Payee address City; State; Zip Code P.O. Box 413 Austin, TX 78767			
8 PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political Donation	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 03/10/2011		Payee name Central Texas Democratic Forum			
Amount (\$) \$100.00		Payee address City; State; Zip Code 1105 W. 12th Austin, TX 78703			
8 PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political contribution	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 03/28/2011		Payee name Chavez, Feli			
Amount (\$) \$75.00		Payee address City; State; Zip Code 11820 Navasota St. Manor, TX 78653			
8 PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor for campaign research and creating documents	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 6/16 Report: 26/36		2 FILER NAME DAVIS, RON		3 ACCOUNT # (TEC filers) 12312005	
4 Date 05/20/2011	5 Payee name Chavez, Feli				
6 Amount (\$) \$200.00	7 Payee address City; State; Zip Code 11820 Navasota St. Manor, TX 78653				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor for campaign research and creating documents		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 06/10/2011	Payee name Chavez, Feli				
Amount (\$) \$100.00	Payee address City; State; Zip Code 11820 Navasota St. Manor, TX 78653				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor for campaign research and creating documents		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 04/19/2011	Payee name Cinco De Mayo Committee				
Amount (\$) \$25.00	Payee address City; State; Zip Code 314 West 11th Street, Suite 525 Austin, TX 78701				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Donation to celebration of Mexican heritage and pride,		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 01/20/2011	Payee name Comerica Bank				
Amount (\$) \$6.95	Payee address City; State; Zip Code 2315 E. Anderson Lane Austin, TX 78752				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Online billing fee		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 7/16 Report: 27/36	2 FILER NAME DAVIS, RON	3 ACCOUNT # (TEC filers) 12312005
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4 Date 02/17/2011	5 Payee name Comerica Bank
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6 Amount (\$) \$6.95	7 Payee address City; State; Zip Code 2315 E. Anderson Lane Austin, TX 78752
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Online billing fee
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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 02/23/2011	Payee name Comerica Bank
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Amount (\$) \$10.00	Payee address City; State; Zip Code 2315 E. Anderson Lane Austin, TX 78752
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Activity fee
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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 03/17/2011	Payee name Comerica Bank
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Amount (\$) \$6.95	Payee address City; State; Zip Code 2315 E. Anderson Lane Austin, TX 78752
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Online billing fee
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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 04/19/2011	Payee name Comerica Bank
--------------------	-----------------------------

Amount (\$) \$6.95	Payee address City; State; Zip Code 2315 E. Anderson Lane Austin, TX 78752
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Online billing fee
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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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 8/16 Report: 28/36	2 FILER NAME DAVIS, RON	3 ACCOUNT # (TEC filers) 12312005
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4 Date 05/18/2011	5 Payee name Comerica Bank
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6 Amount (\$) \$6.95	7 Payee address City; State; Zip Code 2315 E. Anderson Lane Austin, TX 78752
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Online billing fee
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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 06/17/2011	Payee name Comerica Bank
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Amount (\$) \$6.95	Payee address City; State; Zip Code 2315 E. Anderson Lane Austin, TX 78752
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Online billing fee
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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 02/23/2011	Payee name Diana Flower Shop
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Amount (\$) \$108.26	Payee address City; State; Zip Code 2614 E. 7th Street Austin, TX 78702-3958
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts/Awards/Memorials Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Flowers for constituent funeral
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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 05/13/2011	Payee name Diana Flower Shop
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Amount (\$) \$54.12	Payee address City; State; Zip Code 2614 E. 7th Street Austin, TX 78702-3958
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts/Awards/Memorials Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Flower for constituent funeral
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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**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 9/16 Report: 29/36		2 FILER NAME DAVIS, RON		3 ACCOUNT # (TEC filers) 12312005	
4 Date 06/10/2011		5 Payee name Diana Flower Shop			
6 Amount (\$) \$54.13		7 Payee address City; State; Zip Code 2614 E. 7th Street Austin, TX 78702-3958			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Gifts/Awards/Memorials Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Flowers for constituent funeral	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 05/06/2011		Payee name Greater Austin Hispanic Chamber of Commerce			
Amount (\$) \$125.00		Payee address City; State; Zip Code 2800 South IH 35 Suite 260 Austin, TX 78704			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Donation to expand the business culture in austin	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 02/28/2011		Payee name John Lipscombe Campaign			
Amount (\$) \$125.00		Payee address City; State; Zip Code 908 E. 5th Street Ste 114 Austin, TX 78702			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political contribution	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 02/23/2011		Payee name Ortralla LuNone Mosley Foundation, Inc. 501(3)C			
Amount (\$) \$160.00		Payee address City; State; Zip Code P.O. Box 143024 Austin, TX 78714			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> donation to prevent teenage dating violence	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 10/16 Report: 30/36		2 FILER NAME DAVIS, RON		3 ACCOUNT # (TEC filers) 12312005	
4 Date 05/21/2011	5 Payee name PayPal				
6 Amount (\$) \$7.55	7 Payee address City; State; Zip Code P.O. Box 45950 Omaha, NE 68145-0950				
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) <input type="checkbox"/> Fee charged for online campaign contribution		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 03/15/2011	Payee name People Organized in Defense of Earth and Her Resources (PODER)				
Amount (\$) \$100.00	Payee address City; State; Zip Code P.O. Box 6237 Austin, TX 78762				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Donation to encourage participation of communities in a safe environment		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 06/10/2011	Payee name Sam Biscoe Special Project				
Amount (\$) \$200.00	Payee address City; State; Zip Code P.O. Box 1748 Austin, TX 78767				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Donation for the Juneteenth, the emancipation of African Americans from slavery		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 05/13/2011	Payee name Sickle Cell Association of Austin				
Amount (\$) \$100.00	Payee address City; State; Zip Code 314 East Highland Mall Bldg, suite 108 Austin, TX 78752				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Donation to benefits sickle cell disease persons in the Austin community		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 11/16 Report: 31/36	2 FILER NAME DAVIS, RON	3 ACCOUNT # (TEC filers) 12312005
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4 Date 03/11/2011	5 Payee name Spears, Sue
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6 Amount (\$) \$75.00	7 Payee address City; State; Zip Code 7813 Colony Park Dr. Austin, TX 78724
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor for campaign research and creating documents
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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 03/24/2011	Payee name Spears, Sue
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Amount (\$) \$75.00	Payee address City; State; Zip Code 7813 Colony Park Dr. Austin, TX 78724
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor for campaign research and creating documents
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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 05/06/2011	Payee name Spears, Sue
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Amount (\$) \$200.00	Payee address City; State; Zip Code 7813 Colony Park Dr. Austin, TX 78724
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor for campaign research and creating documents
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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 06/10/2011	Payee name Spears, Sue
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Amount (\$) \$100.00	Payee address City; State; Zip Code 7813 Colony Park Dr. Austin, TX 78724
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor for campaign research and creating documents
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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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 12/16 Report: 32/36		2 FILER NAME DAVIS, RON		3 ACCOUNT # (TEC filers) 12312005	
4 Date 01/10/2011	5 Payee name Sprint				
6 Amount (\$) \$71.97	7 Payee address City; State; Zip Code P.O. Box 8077 London, KY 40747-8753				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) OTHER - Computer/Internet		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Monthly chagre for internet 3G Connection Card 5G for campaign laptop computer		
	Candidate / Officeholder name		Office sought:	Office held:	
Date 02/08/2011	Payee name Sprint				
Amount (\$) \$71.97	Payee address City; State; Zip Code P.O. Box 8077 London, KY 40747-8753				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OTHER - Computer/Internet		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Monthly chagre for internet 3G Connection Card 5G for campaign laptop computer		
	Candidate / Officeholder name		Office sought:	Office held:	
Date 03/11/2011	Payee name Sprint				
Amount (\$) \$71.97	Payee address City; State; Zip Code P.O. Box 8077 London, KY 40747-8753				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OTHER - Computer/Internet		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Monthly chagre for internet 3G Connection Card 5G for campaign laptop computer		
	Candidate / Officeholder name		Office sought:	Office held:	
Date 04/08/2011	Payee name Sprint				
Amount (\$) \$71.97	Payee address City; State; Zip Code P.O. Box 8077 London, KY 40747-8753				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OTHER - Computer/Internet		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Monthly chagre for internet 3G Connection Card 5G for campaign laptop computer		
	Candidate / Officeholder name		Office sought:	Office held:	

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 13/16 Report: 33/36		2 FILER NAME DAVIS, RON		3 ACCOUNT # (TEC filers) 12312005	
4 Date 05/10/2011	5 Payee name Sprint				
6 Amount (\$) \$71.97	7 Payee address City; State; Zip Code P.O. Box 8077 London, KY 40747-8753				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) OTHER - Computer/Internet		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Monthly chagre for internet 3G Connection Card 5G for campaign laptop computer		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 06/08/2011	Payee name Sprint				
Amount (\$) \$71.97	Payee address City; State; Zip Code P.O. Box 8077 London, KY 40747-8753				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OTHER - Cpmouter/Internet		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Monthly chagre for internet 3G Connection Card 5G for campaign laptop computer		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 05/23/2011	Payee name Staple				
Amount (\$) \$25.98	Payee address City; State; Zip Code 1201 Barbara Jordan Blvd Suite 700 Austin, TX 78723				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OTHER - Office Supply		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Case of 11.5 by 11 Paper		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 03/15/2011	Payee name Star of Texas Fair & Rodeo				
Amount (\$) \$100.00	Payee address City; State; Zip Code 9100 Decker Lake Road Austin, TX 78724				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Donation to the scholarship program		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION Guide explains how to complete this form.

1 PAGE # Schedule: 14/16 Report: 34/36		2 FILER NAME DAVIS, RON		3 ACCOUNT # (TEC filers) 12312005	
4 Date 05/11/2011	5 Payee name Threadgill's World Headquarters Restaurant				
6 Amount (\$) \$1,461.48	7 Payee address City; State; Zip Code 301 West Riverside Dr Austin, TX 78704				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Food and beverage for May 11, 2011 fund-raiser at Threadgill's		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 04/07/2011	Payee name United States Post Office				
Amount (\$) \$70.40	Payee address City; State; Zip Code GMF Station Austin, TX 78710-9765				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OTHER - Post Office		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Stamps for campaign business and political fund-raising		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 06/15/2011	Payee name United States Post Office				
Amount (\$) \$61.00	Payee address City; State; Zip Code GMF Station Austin, TX 78710-9765				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OTHER - Post Office		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Stamps for campaign business and political fund-raising		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 03/23/2011	Payee name University of Texas Austin Volunteer & Service Learning Center				
Amount (\$) \$100.00	Payee address City; State; Zip Code 100 West Dean Keeton Street, 4th floor Mail Code 46300 Austin, TX 78712				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contribution to UT student volunteers who clean areas of Austin		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 15/16 Report: 35/36		2 FILER NAME DAVIS, RON		3 ACCOUNT # (TEC filers) 12312005	
4 Date 05/24/2011	5 Payee name Wilhite, Deone				
6 Amount (\$) \$100.00	7 Payee address City; State; Zip Code 7 Kern Ramble Austin, TX 78722				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor for campaign research and creating documents		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 06/10/2011	Payee name Wilhite, Deone				
Amount (\$) \$100.00	Payee address City; State; Zip Code 7 Kern Ramble Austin, TX 78722				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor for campaign research and creating documents		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 05/24/2011	Payee name Worley Printing				
Amount (\$) \$920.48	Payee address City; State; Zip Code 3217 I-35 North Austin, TX 78722				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printed invitations, envelopes, lasered addresses and mailing		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 04/26/2011	Payee name Yahoo				
Amount (\$) \$11.88	Payee address City; State; Zip Code 701 First Avenue Sunnyvale, CA 94089				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OTHER - Computer/Internet		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Annual charge for private domain registration for campaign Website		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 16/16 Report: 36/36		2 FILER NAME DAVIS, RON		3 ACCOUNT # (TEC filers) 12312005	
4 Date 05/09/2011		5 Payee name Yahoo			
6 Amount (\$) \$119.40		7 Payee address City; State; Zip Code 701 First Avenue Sunnyvale, CA 94089			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) OTHER - computer/Internet		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Annual cost for hosting the campaign website	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

Office use only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines 12FE4M5

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES PEOPLE

ADDRESS (number and street) 1625 L STREET NW

(Check if address is changed) WASHINGTON DC 20036

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address is changed) taggart@afscme.org

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed) NONE

2. DATE 07 / 06 / 2010

3. FEC IDENTIFICATION NUMBER C C00011114

4. IS THIS STATEMENT NEW (N) OR AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete

Type or Print Name of Treasurer LEE A. SAUNDERS

Signature of Treasurer Electronically Filed by LEE A. SAUNDERS Date 07 / 06 / 2010

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

Office Use Only				
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For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 02/2009)

5. TYPE OF COMMITTEE (Check One)

Candidate Committee:

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate _____

Candidate Party Affiliation Office Sought: House Senate President State
 District

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

- (d) This committee is a (National, State (or subordinate) committee of the (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
 - Corporation Corporation w/o Capital Stock Labor Organization
 - Membership Organization Trade Association Cooperative
- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
 - In addition, this committee is a Lobbyist/Registrant PAC.
 - In addition, this committee is a Lobbyist/Registrant PAC.
 - In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. _____	FEC ID number	<input type="checkbox"/>
2. _____	FEC ID number	<input type="checkbox"/>
3. _____	FEC ID number	<input type="checkbox"/>
4. _____	FEC ID number	<input type="checkbox"/>

Write or Type Committee Name

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES, AFL-CIO

Mailing Address

1625 L STREET NW

WASHINGTON

DC

20036

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:

Connected Organization

Affiliated Committee

Joint Fundraising Representative

Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address, (phone number -- optional), and position of the person in possession of Committee books and records.

Full Name

CHARLES JURGONIS

Mailing Address

1625 L Street NW

Washington

DC

20036

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

DIRECTOR

Telephone number

202

429

1007

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer

LEE A. SAUNDERS

Mailing Address

1625 L Street NW

Washington

DC

20036

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

SECRETARY-TREASURER

Telephone number

202

429

1200

Full Name of Designated Agent

Mailing Address

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

AMALGAMATED BANK OF NEW YORK

Mailing Address

1825 K Street, NW

Washington

DC

20006

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

BANK OF AMERICA

Mailing Address

730 15th Street, NW

Washington

DC

20005

CITY ▲

STATE ▲

ZIP CODE ▲

Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

[ADDITIONAL]

Name of Bank, Depository, etc.

Mailing Address

_____ - _____

CITY ▲

STATE ▲

ZIP CODE ▲

[ADDITIONAL]

Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

DISTRICT COUNCIL 37-AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (DC37PEOPLE)

Mailing Address

125 Barclay Street

New York

NY

10007

_____ - _____

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:

Connected Organization

Affiliated Committee

Joint Fundraising Representative

Leadership PAC Sponsor

[ADDITIONAL]

Designated Agent

Full Name

Mailing Address

_____ - _____

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

_____ - _____

Joint Fundraiser Participant

[ADDITIONAL]

FEC ID number

C _____