

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
7707 COVER SHEET PG 1

The JC/OH Instruction Guide explains how to complete this form.		1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed: <div style="font-size: 2em; text-align: center;">6</div>										
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR: Ms FIRST: Nancy MI: W NICKNAME: LAST: Hohengarten SUFFIX:	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: center;">OFFICE USE ONLY</th> </tr> <tr> <td colspan="2" style="padding: 2px;">Date Received</td> </tr> <tr> <td colspan="2" style="padding: 2px;">Date Hand-delivered or Postmarked</td> </tr> <tr> <td style="padding: 2px;">Receipt #</td> <td style="padding: 2px;">Amount</td> </tr> <tr> <td style="padding: 2px;">Date Processed</td> <td style="padding: 2px;">Date Imaged</td> </tr> </table>		OFFICE USE ONLY		Date Received		Date Hand-delivered or Postmarked		Receipt #	Amount	Date Processed	Date Imaged
OFFICE USE ONLY													
Date Received													
Date Hand-delivered or 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 P.O. Box 1748 Austin, TX 78767	<div style="writing-mode: vertical-rl; transform: rotate(180deg); font-weight: bold; font-size: 0.8em;">FILED FOR RECORD</div>											
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE: PHONE NUMBER: EXTENSION: (512) 554-6428												
6 CAMPAIGN TREASURER NAME	MS / MRS / MR: Mr. FIRST: Larry MI: W NICKNAME: LAST: Sawyer SUFFIX: Jr												
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #: CITY: STATE: ZIP CODE 1004 West Avenue Austin, TX 78701												
8 CAMPAIGN TREASURER PHONE	AREA CODE: PHONE NUMBER: EXTENSION: (512) 479-5017												
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 / 11 12 / 31 / 11												
11 ELECTION	ELECTION DATE Month Day Year / /	ELECTION TYPE: <i>Not on ballot in 2012</i> <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special											
12 OFFICE	OFFICE HELD (if any) Travis County Court at Law 5	13 OFFICE SOUGHT (if known) But Not on ballot											
GO TO PAGE 2													

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: 4		2 FILER NAME Nancy Hohengarten		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 12-13-11		5 Payee name Shoreline Grill			
6 Amount (\$) 150.55		7 Payee address; City; State; Zip Code 98 San Jacinto Austin, TX 78701			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Food/Beverage		(b) Description (If travel outside of Texas, complete Schedule T) Staff Holiday Lunch	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10-18-11		Payee name Artworks Gallery			
Amount (\$) 320.54		Payee address; City; State; Zip Code 1214 W. 6th Street, 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 Print	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 8-29-11		Payee name Leaf			
Amount (\$) 70.98		Payee address; City; State; Zip Code 419 W. 2nd St., Austin, TX 78701			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food/Beverage		Description (If travel outside of Texas, complete Schedule T) Staff Lunch	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 8-1-11		Payee name Amazon.com			
Amount (\$) 29.95		Payee address; City; State; Zip Code Seattle, WA			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food/Beverage		Description (If travel outside of Texas, complete Schedule T) Coffee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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)

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1 Total pages Schedule F: 4	2 FILER NAME Nancy Hohengarten	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 7-19-11	5 Payee name Austin AFL-CIO Council
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6 Amount (\$) 100.00	7 Payee address; City; State; Zip Code PO Box 87, Austin, TX 78767
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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) Sponsorship of Event
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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 7-19-11	Payee name South Austin Democrats
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Amount (\$) 50.00	Payee address; City; State; Zip Code PO Box 152592, Austin, TX 78715
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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) Sponsorship of 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 8-28-11	Payee name Austin Tejano Democrats
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Amount (\$) 20.00	Payee address; City; State; Zip Code 2544 Stout wood Circle Austin TX 78745
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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 Dues
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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 10-27-11	Payee name Hispanic Bar Assoc. Foundation
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Amount (\$) 150.00	Payee address; City; State; Zip Code P.O. Box 12692, Austin, TX 78711
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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) Sponsorship of 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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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) |

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1 Total pages Schedule F: 4	2 FILER NAME Nancy Hohengarten	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 12-1-11	5 Payee name Capital Asian American Democrats
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6 Amount (\$) 10.00	7 Payee address; City; State; Zip Code PO Box 300595 Austin, TX 78703
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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) Membership Dues
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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 12-9-11	Payee name David Terrell
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Amount (\$) 250.00	Payee address; City; State; Zip Code 2600 Howellwood, Austin, TX 78748
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) BBQ for CAD Holiday Party
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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 12-12-11	Payee name Walter Poston
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Amount (\$) 100.00	Payee address; City; State; Zip Code 509 W. 11th, 4th Floor 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) Holiday - Staff
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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 12-12-11	Payee name Kristen Meitzen
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Amount (\$) 100.00	Payee address; City; State; Zip Code 509 W. 11th, 4th Floor 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) Holiday - Staff
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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

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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)

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1 Total pages Schedule F: 4		2 FILER NAME Nancy Hohengarten		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 12-12-11		5 Payee name Anna Marie DeLaRosa			
6 Amount (\$) 100.00		7 Payee address; City; State; Zip Code 411 W. 13 th St. Suite 400 Austin, TX 78701			
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-staff	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 12-12-11		Payee name Shonna Castillo			
Amount (\$) 100.00		Payee address; City; State; Zip Code 509 W. 11 th , 4 th Floor Austin TX 78701			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Gift		Description (If travel outside of Texas, complete Schedule T) Holiday-Staff	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10-7-11		Payee name Rural Rooster			
Amount (\$) 418.93		Payee address; City; State; Zip Code 2602 E. Cesar Chavez 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) Tshirts for NAMI Walk	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 11-10-11		Payee name PF Chang			
Amount (\$) 88.59		Payee address; City; State; Zip Code 201 San Jacinto Blvd. Austin, TX 78701			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food/Beverage		Description (If travel outside of Texas, complete Schedule T) Staff Lunch	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

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

14 C/OH NAME Nancy Hohengarten 15 ACCOUNT # (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

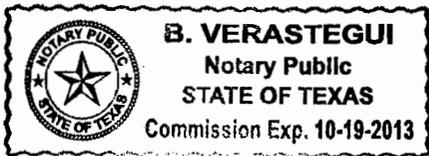
THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

<input type="checkbox"/> additional pages	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS
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17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 2059.54
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 5663.26
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

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.



Nancy Hohengarten
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Nancy Hohengarten, this the 11th day of January, 20 12, to certify which, witness my hand and seal of office.

B. Verastegui B. Verastegui Notary
Signature of officer administering oath Print name of officer administering oath Title of officer administering oath