

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

7708

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

The C/OH Instruction Guide explains how to complete this form.		<b>1 ACCOUNT #</b> (Ethics Commission Filers)  1	<b>2 Total pages filed:</b>															
<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%; font-size: small;">MS / MRS / MR</td> <td style="width:35%; font-size: small;">FIRST</td> <td style="width:15%; font-size: small;">MI</td> <td style="width:35%;"></td> </tr> <tr> <td></td> <td>Mr. Ernest</td> <td></td> <td></td> </tr> <tr> <td style="font-size: small;">NICKNAME</td> <td style="font-size: small;">LAST</td> <td style="font-size: small;">SUFFIX</td> <td></td> </tr> <tr> <td></td> <td>Ernie Pedraza</td> <td></td> <td></td> </tr> </table>	MS / MRS / MR	FIRST	MI			Mr. Ernest			NICKNAME	LAST	SUFFIX			Ernie Pedraza			<div style="border: 1px solid black; padding: 5px;"> <p style="text-align: center; margin: 0;"><b>OFFICE USE ONLY</b></p> <p style="font-size: x-small; margin: 0;">Date Received</p> <div style="text-align: center; margin: 5px 0;"> <span style="font-size: 2em; font-weight: bold;">12</span> </div> <p style="font-size: x-small; margin: 0;">Date Hand-Delivered or Postmarked</p> <p style="font-size: x-small; margin: 0;">Receipt #      Amount</p> <p style="font-size: x-small; margin: 0;">Date Processed</p> <p style="font-size: x-small; margin: 0;">Date Imaged</p> </div>
MS / MRS / MR	FIRST	MI																
	Mr. Ernest																	
NICKNAME	LAST	SUFFIX																
	Ernie Pedraza																	
<b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="font-size: small;">ADDRESS / PO BOX;</td> <td style="font-size: small;">APT / SUITE #;</td> <td style="font-size: small;">CITY;</td> <td style="font-size: small;">STATE;</td> <td style="font-size: small;">ZIP CODE</td> </tr> <tr> <td colspan="5">4601 Grand Cypress Dr. Austin, Texas 78747</td> </tr> </table> <input type="checkbox"/> change of address	ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE	4601 Grand Cypress Dr. Austin, Texas 78747											
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<b>5 CANDIDATE / OFFICEHOLDER PHONE</b>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="font-size: small;">AREA CODE</td> <td style="font-size: small;">PHONE NUMBER</td> <td style="font-size: small;">EXTENSION</td> </tr> <tr> <td>( 512 )</td> <td>736-2848</td> <td></td> </tr> </table>	AREA CODE	PHONE NUMBER	EXTENSION	( 512 )	736-2848												
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	MS. Sylvia																	
NICKNAME	LAST	SUFFIX																
	Camarillo																	
<b>7 CAMPAIGN TREASURER ADDRESS (residence or business)</b>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="font-size: small;">STREET ADDRESS (NO PO BOX PLEASE);</td> <td style="font-size: small;">APT / SUITE #;</td> <td style="font-size: small;">CITY;</td> <td style="font-size: small;">STATE;</td> <td style="font-size: small;">ZIP CODE</td> </tr> <tr> <td colspan="2">10050 Great Hills Trail</td> <td colspan="3">Austin, Texas 78759</td> </tr> </table>			STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY;	STATE;	ZIP CODE	10050 Great Hills Trail		Austin, Texas 78759							
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<b>9 REPORT TYPE</b>	<table style="width:100%; border-collapse: collapse;"> <tr> <td><input checked="" type="checkbox"/> January 15</td> <td><input type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)</td> </tr> <tr> <td><input type="checkbox"/> July 15</td> <td><input type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded \$500 limit</td> <td><input type="checkbox"/> Final report (Attach C/OH - FR)</td> </tr> </table>			<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)							
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<b>10 PERIOD COVERED</b>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="font-size: x-small;">Month</td> <td style="font-size: x-small;">Day</td> <td style="font-size: x-small;">Year</td> <td style="font-size: x-small;">THROUGH</td> <td style="font-size: x-small;">Month</td> <td style="font-size: x-small;">Day</td> <td style="font-size: x-small;">Year</td> </tr> <tr> <td>07</td> <td>01</td> <td>2011</td> <td></td> <td>12</td> <td>31</td> <td>2011</td> </tr> </table>			Month	Day	Year	THROUGH	Month	Day	Year	07	01	2011		12	31	2011	
Month	Day	Year	THROUGH	Month	Day	Year												
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<b>11 ELECTION</b>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="font-size: x-small;">Month</td> <td style="font-size: x-small;">ELECTION DATE</td> <td style="font-size: x-small;">Day</td> <td style="font-size: x-small;">Year</td> <td colspan="3" style="font-size: x-small;">ELECTION TYPE</td> </tr> <tr> <td>04</td> <td>03</td> <td>2012</td> <td></td> <td><input checked="" type="checkbox"/> Primary</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> General</td> <td><input type="checkbox"/> Special</td> </tr> </table>			Month	ELECTION DATE	Day	Year	ELECTION TYPE			04	03	2012		<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> General	<input type="checkbox"/> Special
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04	03	2012		<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> General	<input type="checkbox"/> Special											
<b>12 OFFICE</b>	OFFICE HELD (if any)	<b>13 OFFICE SOUGHT (if known)</b> Travis County Constable Pct. 4																
<b>14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS</b>	<p style="font-size: x-small;">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.</p> <p style="font-size: x-small;">Name</p> <p style="font-size: x-small;">Address / PO Box; Apt. / Suite #; City; State; Zip Code</p> <input type="checkbox"/> additional pages																	

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

**15 C/OH NAME** Ernest Pedraza **16 ACCOUNT #** (Ethics Commission Filers)

**17 NOTICE FROM POLITICAL COMMITTEE(S)**

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

COMMITTEE TYPE

GENERAL

SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

additional pages

**18 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)

\$ 7,335.00

**EXPENDITURE TOTALS**

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

\$ 151.50

4. TOTAL POLITICAL EXPENDITURES

\$ 16,098.59

**CONTRIBUTION BALANCE**

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

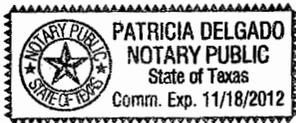
\$ 7002.93

**OUTSTANDING LOAN TOTALS**

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

\$ 10,000.00

**19 AFFIDAVIT**



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

*Ernest Pedraza*  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Ernest Pedraza, this the 16 day of Jan., 20 12, to certify which, witness my hand and seal of office.

*Patricia M. Delgado*  
Signature of officer administering oath

Patricia M. Delgado  
Printed 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 Total pages Schedule A: <b>9</b>	
2 FILER NAME Ernest Pedraza		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 07/29/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Marcelo Vera 6 Contributor address; City; State; Zip Code 607 Oakwood Dr. Buda, Texas 78610-9340	7 Amount of contribution (\$)  \$100.00  (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 07/29/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) David Lopez Contributor address; City; State; Zip Code 38 Country Oaks, Dr. Buda, Texas 78610-9338	Amount of contribution (\$)  \$100.00  (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/29/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Luis Delgado Contributor address; City; State; Zip Code 33 Country Oaks Dr. Buda, Texas 78610-9338	Amount of contribution (\$)  \$100.00  (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Travis County Sheriff's Association Contributor address; City; State; Zip Code 400 W. 14th Street, Austin, Texas 78701	Amount of contribution (\$)  \$500.00  (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rick Reyna Contributor address; City; State; Zip Code 10407 La Costa, Austin, Texas 78747-1214	Amount of contribution (\$)  \$50.00  (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

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2 FILER NAME Ernest Pedraza		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 09/11/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eric Rangel 6 Contributor address; City; State; Zip Code 1500 E. Riverside Dr. #587, Austin, Texas 78741-1171	7 Amount of contribution (\$) \$20.00 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pete Rivera Contributor address; City; State; Zip Code 5405 Prock Lane, Austin, Texas 78721	Amount of contribution (\$) \$20.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/28/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pilar Sanchez Contributor address; City; State; Zip Code 2117 Barton Hills Dr. Austin, Texas 78704	Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/28/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dolores Briones Contributor address; City; State; Zip Code 3014 w. William Cannon Dr. #1614 Austin, Texas 78745	Amount of contribution (\$) \$50.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/28/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marion Sanchez-Lozano Contributor address; City; State; Zip Code 5934 Republic of Texas Blvd. Austin, Texas 78735	Amount of contribution (\$) \$50.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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2 FILER NAME Ernest Pedraza		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 09/28/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pat Delgado	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 4625 Grand Cypress Drive, Austin, Texas 78747		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/28/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruth Ruiz	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1201 E. 3rd St. Austin, Texas 78702		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/06/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephen SImank	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2302 N. Austin Ave. Georgetown, Texas 78626		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/13/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valdemar Perez	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 5101 Prairie Dunes Dr. Austin, Texas 78747		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/13/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Virginia Corona	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 10011 Wild Dunes Dr. Austin, Texas 78747		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.			
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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

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2 FILER NAME Ernest Pedraza		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 10/13/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joni Ortiz 6 Contributor address; City; State; Zip Code 508 Thrasher Lane, Austin, Texas 78741	7 Amount of contribution (\$) \$50.00 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/13/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diana Ochoa Contributor address; City; State; Zip Code 1304 Miss Allison's Way, Pflugerville, Texas 78660	Amount of contribution (\$) 100.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/17/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barbara Tejero Contributor address; City; State; Zip Code 8612 Kammey Cv. Austin, Texas 78747	Amount of contribution (\$) \$50.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/17/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laura Cagel Contributor address; City; State; Zip Code 808 A. Emily Dickerson, Pflugerville, Texas 78660	Amount of contribution (\$) \$50.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/17/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mary Jane Vasquez Contributor address; City; State; Zip Code 502 Blueberry Hill, Austin, Texas 78745	Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

9

2 FILER NAME

Ernest Pedraza

3 ACCOUNT # (Ethics Commission Filers)

4 Date  
10/17/2011

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

Selena Walsh-Wheeler

6 Contributor address; City; State; Zip Code

7403 Jester Blvd., Austin, Texas 78750

7 Amount of contribution (\$)

\$100.00

(If travel outside of Texas, complete Schedule T)

8 In-kind contribution description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date  
10/17/2011

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

Genaro Chavez

Contributor address; City; State; Zip Code

5400 Jeffburn Cove, Austin, Texas 78745

Amount of contribution (\$)

\$50.00

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
10/17/2011

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

Linda Chavez

Contributor address; City; State; Zip Code

5400 Jeffburn Cove, Austin, Texas 78745

Amount of contribution (\$)

\$50.00

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
10/17/2011

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

Linda Ramirez

Contributor address; City; State; Zip Code

10301 River Plantation Dr., Austin, Texas 78747

Amount of contribution (\$)

\$100.00

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
10/17/2011

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

Elizabeth Garcia

Contributor address; City; State; Zip Code

713 Heron Ave., Mcallen, Texas 78504

Amount of contribution (\$)

\$50.00

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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4 Date 10/17/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Patricia Barrera 6 Contributor address; City; State; Zip Code 16900 Cranston Drive, Austin, Texas 78664	7 Amount of contribution (\$)  \$100.00  (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/17/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cynthia Valadez-Mata Contributor address; City; State; Zip Code 2407 E. Cesar Chavez, Austin, Texas 78701	Amount of contribution (\$)  \$100.00  (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/17/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Guadalupe Morin Contributor address; City; State; Zip Code 3306 Gallop Cv., Austin, Texas 78745	Amount of contribution (\$)  \$50.00  (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/17/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gloria Torres Contributor address; City; State; Zip Code 2310 Shelby Oak Lane, Austin, Texas 78745	Amount of contribution (\$)  \$50.00  (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/17/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Esther Camacho Contributor address; City; State; Zip Code 10212 Wind Cave Trail, Austin, Texas 78745	Amount of contribution (\$)  \$20.00  (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <b>9</b>	
2 FILER NAME Ernest Pedraza		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 10/26/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leon Williams 6 Contributor address; City; State; Zip Code 835 Clark Cv., Buda, Texas 78610	7 Amount of contribution (\$)  \$100.00 <small>(If travel outside of Texas, complete Schedule T)</small>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 11/08/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dolores Macias Contributor address; City; State; Zip Code 10017 Wild Dunes Drive, Austin, Texas 78745	Amount of contribution (\$)  \$50.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/08/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melvin White Contributor address; City; State; Zip Code 809 Windsor Hill Dr., Plugerville, Texas 78660	Amount of contribution (\$)  \$100.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/08/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas Parker Contributor address; City; State; Zip Code 2005 E. Cesar Chavez, Austin, Texas 78702	Amount of contribution (\$)  \$100.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/21/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Billy Sifuentes Contributor address; City; State; Zip Code 730 Reliance Drive, Buda, Texas 78610	Amount of contribution (\$)  \$100.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

**SCHEDULE A**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <b>9</b>	
2 FILER NAME Ernest Pedraza		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 11/07/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>John Sisson</b> 6 Contributor address; City; State; Zip Code <b>10216 Big Thicket Drive, Austin, Texas 78747</b>	7 Amount of contribution (\$)  <b>\$50.00</b> <small>(If travel outside of Texas, complete Schedule T)</small>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 08/28/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Thomas Martinez</b> Contributor address; City; State; Zip Code <b>4909 Calhoun Canyon Loop, Austin, Texas 78735</b>	Amount of contribution (\$)  <b>\$50.00</b> <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/24/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>William Russell Hubbarth</b> Contributor address; City; State; Zip Code <b>9600 Escarpment #745, Austin, Texas 78749</b>	Amount of contribution (\$)  <b>\$100.00</b> <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/18/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Mary Tamayo</b> Contributor address; City; State; Zip Code <b>5404 George St., Austin, Texas 78744</b>	Amount of contribution (\$)  <b>\$50.00</b> <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/14/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Ernest Perales</b> Contributor address; City; State; Zip Code <b>8403 Shenandoah Dr., Austin, Texas 78753</b>	Amount of contribution (\$)  <b>\$200.00</b> <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

9

2 FILER NAME

Ernest Pedraza

3 ACCOUNT # (Ethics Commission Filers)

4 Date  
12/14/2011

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

Juan Gonzalez

6 Contributor address; City; State; Zip Code

PO Box 1417, Elgin, Texas 78621

7 Amount of contribution (\$)

\$100.00

(If travel outside of Texas, complete Schedule T)

8 In-kind contribution description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date  
12/31/2011

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

Charles Schotz

Contributor address; City; State; Zip Code

6300 Nicklaus Place, Austin, Texas 78746

Amount of contribution (\$)

\$100.00

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
12/31/2011

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

Linda Chavez

Contributor address; City; State; Zip Code

5400 Jefferson Cove, Austin, Texas 78745

Amount of contribution (\$)

\$200.00

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
12/31/2011

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

Jimmy Nassour

Contributor address; City; State; Zip Code

4517 Grand Cypress Dr., Austin, Texas 78747

Amount of contribution (\$)

\$3,600.00

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Office Rent

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Contributor address; City; State; Zip Code

Amount of contribution (\$)

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

Page 9

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### 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.

<b>1</b> Total pages Schedule G: 2	<b>2</b> FILER NAME Ernest Pedraza	<b>3</b> ACCOUNT # (Ethics Commission Filers)
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<b>4</b> Date 07/06/2011	<b>5</b> Payee name Office Max
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<b>6</b> Amount (\$) 18.18 <input type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code 9600 S. IH35, Austin, Texas 78748
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<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Printing Expense	(b) Description (If travel outside of Texas, complete Schedule T) Printing
---------------------------------	--	---

Date 08/04/2011	Payee name AT Battery
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Amount (\$) 53.01 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 28918 Hancock Parkway, Valencia California 91355
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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) Laptop Battery
------------------------	---	---

Date 08/07/2011	Payee name Wal-Mart
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Amount (\$) 128.02 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 9300 S. IH35, Austin, Texas 78748
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) Cups/Charcoal/Beverages
------------------------	---	--

Date 12/10/11	Payee name Office Max
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Amount (\$) 12.98 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 9600 S. IH35 Austin, Texas 78748
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) Monthly Planner
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### 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.

<b>1</b> Total pages Schedule G: 2	<b>2</b> FILER NAME Ernest Pedraza	<b>3</b> ACCOUNT # (Ethics Commission Filers)
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<b>4</b> Date 12/28/2011	<b>5</b> Payee name McCOY'S Lumber
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<b>6</b> Amount (\$) \$39.90 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code 6200 Burleson, Austin, Texas 78744
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See categories listed at the top of this schedule) Other	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) 1x2x4 Stakes
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Date	Payee name
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Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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Date	Payee name
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Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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Date	Payee name
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Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F: 11	<b>2</b> FILER NAME Ernest Pedraza	<b>3</b> ACCOUNT # (Ethics Commission Filers)
<b>4</b> Date 07/25/2011	<b>5</b> Payee name Office Depot	
<b>6</b> Amount (\$) \$82.25	<b>7</b> Payee address; City; State; Zip Code 2101 S. Lamar Austin, Texas 78704	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See categories listed at the top of this schedule) Printing	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) Ink Cartridges
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date 07/31/2011	Payee name Texas Democratic Party	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 505 West 12th Street, Suite 200 Austin, Texas 78701	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other	Description (If travel outside of Texas, complete Schedule T) Van Access
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date 8/1/2011	Payee name Austin AFL-CIO Council	
Amount (\$) \$215.00	Payee address; City; State; Zip Code PO Box 301074, Austin, Texas 78703	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) 2011 Labor Day Celebration Ad
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date 08/21/2011	Payee name Randalls	
Amount (\$) \$51.88	Payee address; City; State; Zip Code 2035 W. Ben White Blvd., Austin, Texas 78747	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) Soda, Water
Complete <u>ONLY</u> 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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F: 11	<b>2</b> FILER NAME Ernest Pedraza	<b>3</b> ACCOUNT # (Ethics Commission Filers)
<b>4</b> Date 08/25/2011	<b>5</b> Payee name Sam's Warehouse	
<b>6</b> Amount (\$) \$67.00	<b>7</b> Payee address; City; State; Zip Code 5107 S. IH35, Austin, Texas 78744	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) Water
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date 08/15/2011	Payee name Blue Roots Consulting	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code PO Box 300053, Austin, Texas 78703	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T) Consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date 08/25/2011	Payee name Blue Roots Consulting	
Amount (\$) \$73.02	Payee address; City; State; Zip Code PO Box 300053, Austin, Texas 78703	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) Robo Calls
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date 08/25/2011	Payee name Smokey Denmark's	
Amount (\$) \$142.50	Payee address; City; State; Zip Code 3505 East 5th Street, Austin, Texas 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) Food
Complete <u>ONLY</u> 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  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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** Total pages Schedule F: 11  
**2** FILER NAME: Ernest Pedraza  
**3** ACCOUNT # (Ethics Commission Filers)

**4** Date: 08/27/2011  
**5** Payee name: HEB

**6** Amount (\$): \$135.26  
**7** Payee address; City; State; Zip Code: 2701 E. 7th Street, Austin, Texas 78702

**8** PURPOSE OF EXPENDITURE: Event Expense  
(a) Category (See categories listed at the top of this schedule): Event Expense  
(b) Description (If travel outside of Texas, complete Schedule T): Food

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

Date: 09/30/2011  
Payee name: The Home Depot

Amount (\$): \$354.23  
Payee address; City; State; Zip Code: 3600 S. IH35 Austin, Texas 78704

PURPOSE OF EXPENDITURE: Other  
Category (See categories listed at the top of this schedule): Other  
Description (If travel outside of Texas, complete Schedule T): Post Driver, T Posts

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

Date: 09/29/2011  
Payee name: Office Max

Amount (\$): \$85.44  
Payee address; City; State; Zip Code: 9600 S. IH35, Austin, Texas 78748

PURPOSE OF EXPENDITURE: Printing Expense  
Category (See categories listed at the top of this schedule): Printing Expense  
Description (If travel outside of Texas, complete Schedule T): Ink Cartridges

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

Date: 10/15/2011  
Payee name: Casa Chapala Mexican Grill

Amount (\$): \$536.42  
Payee address; City; State; Zip Code: 101 San Jacinto, Austin, Texas 78701

PURPOSE OF EXPENDITURE: Event Expense  
Category (See categories listed at the top of this schedule): Event Expense  
Description (If travel outside of Texas, complete Schedule T): Food

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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F: 11	<b>2</b> FILER NAME Ernest Pedraza	<b>3</b> ACCOUNT # (Ethics Commission Filers)
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<b>4</b> Date 10/20/2011	<b>5</b> Payee name Blue Roots Consulting
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<b>6</b> Amount (\$) \$50.00	<b>7</b> Payee address; City; State; Zip Code PO Box 300053, Austin, Texas 78703
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<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising	(b) Description (If travel outside of Texas, complete Schedule T) Robo Calls
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/02/2011	Payee name Ace Printing
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Amount (\$) \$2,406.54	Payee address; City; State; Zip Code 7807 Doncaster, Austin, Texas 78745
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing	Description (If travel outside of Texas, complete Schedule T) Yard Signs
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/02/2011	Payee name David Mauro
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Amount (\$) \$500.00	Payee address; City; State; Zip Code 3507 Mt. Bonnell Rd. Austin, Texas 78731
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T) Consulting
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/03/2011	Payee name Aztec Promotional Group
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Amount (\$) \$195.77	Payee address; City; State; Zip Code 2815 Manor Road, Austin, Texas 78722
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) T-Shirts
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F: 11	<b>2</b> FILER NAME Ernest Pedraza	<b>3</b> ACCOUNT # (Ethics Commission Filers)
<b>4</b> Date 11/06/2011	<b>5</b> Payee name The Home Depot	
<b>6</b> Amount (\$) \$116.04	<b>7</b> Payee address; City; State; Zip Code 3600 S. IH 35, Austin, Texas 78704	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See categories listed at the top of this schedule) Other	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) T-Posts
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date 8/01/2011	Payee name Ace Printing	
Amount (\$) \$4,141.21	Payee address; City; State; Zip Code 7807 Doncaster, Austin, Texas 78745	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) Signs, Bumper Stickers, Lapel Labels
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date 07/29/2011	Payee name Constant Communication	
Amount (\$) 16.24	Payee address; City; State; Zip Code 1601 Trapelo Road, Waltham, MA 02451	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) Email Communication
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date 08/05/2011	Payee name Office Max	
Amount (\$) \$28.13	Payee address; City; State; Zip Code 9600 S. IH35, Austin, Texas 78748	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) Ink Jet
Complete <u>ONLY</u> 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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F: 11	<b>2</b> FILER NAME Ernest Pedraza	<b>3</b> ACCOUNT # (Ethics Commission Filers)
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<b>4</b> Date 08/24/2011	<b>5</b> Payee name Max Nofziger
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<b>6</b> Amount (\$) \$250.00	<b>7</b> Payee address; City; State; Zip Code 2118 Clifton St. Austin, Texas 78704
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) Consulting
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 08/25/2011	Payee name HEB
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Amount (\$) \$41.76	Payee address; City; State; Zip Code 6607 S. IH 35, Austin, Texas 78744
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food Expense	Description (If travel outside of Texas, complete Schedule T) Deli Trays
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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 08/26/2011	Payee name Carrie Slaughter
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Amount (\$) \$75.00	Payee address; City; State; Zip Code 4609 Gonzales St Austin, TX 78702-5024
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead	Description (If travel outside of Texas, complete Schedule T) Refrigerator
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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 08/27/2011	Payee name Angel Rivera
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Amount (\$) \$100.00	Payee address; City; State; Zip Code 1807 Cedar Ridge, Austin, Texas 78741
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) DJ
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**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.

<b>1</b> Total pages Schedule F: 11	<b>2</b> FILER NAME Ernest Pedraza	<b>3</b> ACCOUNT # (Ethics Commission Filers)
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<b>4</b> Date 08/29/2011	<b>5</b> Payee name Burnt Orange
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<b>6</b> Amount (\$) \$100.00	<b>7</b> Payee address; City; State; Zip Code 1512 Pennsylvania Ave # A, Austin, TX 78702-2019
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<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) Ad
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 08/29/2011	Payee name Constant Communication
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Amount (\$) \$32.48	Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) Email
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 09/14/2011	Payee name Delwin Goss
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Amount (\$) 820.00	Payee address; City; State; Zip Code 7403 Riverside Dr. #29, Austin, Texas 78741
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Erecting 4X8 Signs
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 09/29/2011	Payee name Constant Communication
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Amount (\$) 32.48	Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) Email
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F: 11	<b>2</b> FILER NAME Ernest Pedraza	<b>3</b> ACCOUNT # (Ethics Commission Filers)
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<b>4</b> Date 10/03/2011	<b>5</b> Payee name Blue Roots Consulting
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<b>6</b> Amount (\$) 1073.02	<b>7</b> Payee address; City; State; Zip Code PO Box 30053, Austin, Texas 78703
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) Consultant Fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10/24/2011	Payee name Office Max
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Amount (\$) 87.11	Payee address; City; State; Zip Code 9600 S. IH35, Austin, Texas 78748
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) Ink Jet
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10/29/2011	Payee name Constant Communication
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Amount (\$) 32.48	Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) Email
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/21/2011	Payee name University Realty
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Amount (\$) 310.95	Payee address; City; State; Zip Code 705 W. 24th St. Ste. C. Austin, Texas 78705
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead	Description (If travel outside of Texas, complete Schedule T) Utilities
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F: 11	<b>2</b> FILER NAME Ernest Pedraza	<b>3</b> ACCOUNT # (Ethics Commission Filers)
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<b>4</b> Date 11/28/2011	<b>5</b> Payee name Travis County Democrat Party
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<b>6</b> Amount (\$) \$1,000.00	<b>7</b> Payee address; City; State; Zip Code 505 W. 12th Street Suite # 200, Austin, Texas 78702
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<b>8</b> 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) Filing Fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/29/2011	Payee name Constant Communication
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Amount (\$) \$32.48	Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) Email
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12/12/2011	Payee name University Realty
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Amount (\$) \$67.80	Payee address; City; State; Zip Code 705 W. 24th, Ste. C., Austin, Texas 78705
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Officer Overhead	Description (If travel outside of Texas, complete Schedule T) Utilities
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12/14/2011	Payee name Sam's Warehouse
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Amount (\$) \$200.00	Payee address; City; State; Zip Code 5107 S. IH35, Austin, Texas 78744
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) Deli Trays/Paper cups and Plates/Drinks
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F: 11	<b>2</b> FILER NAME Ernest Pedraza	<b>3</b> ACCOUNT # (Ethics Commission Filers)
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<b>4</b> Date 12/20/2011	<b>5</b> Payee name Best Buy
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<b>6</b> Amount (\$) \$162.36	<b>7</b> Payee address; City; State; Zip Code 9300 S. IH 35, Austin, Texas 78748
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<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Printing Expense	(b) Description (If travel outside of Texas, complete Schedule T) Printer
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12/20/2011	Payee name Blue Roots Strategies
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Amount (\$) 181.96	Payee address; City; State; Zip Code PO Box 300053, Austin, Texas 78703
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) Robo Calls
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12/28/2011	Payee name Constant Communication
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Amount (\$) \$32.48	Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) Email
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12/28/2011	Payee name Blue Roots Consulting
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Amount (\$) \$500.00	Payee address; City; State; Zip Code PO Box 300053, Austin, Texas 78703
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T) Consulting
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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**POLITICAL EXPENDITURES**

**SCHEDULE F**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F: <b>11</b>	<b>2</b> FILER NAME <b>Ernest Pedraza</b>	<b>3</b> ACCOUNT # (Ethics Commission Filers)
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<b>4</b> Date <b>12/31/2011</b>	<b>5</b> Payee name <b>University Realty</b>
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<b>6</b> Amount (\$) <b>\$65.71</b>	<b>7</b> Payee address; City; State; Zip Code <b>705 W. 24th Street, Suite C, Austin, Texas 78705</b>
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<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <b>Office Overhead</b>	(b) Description (If travel outside of Texas, complete Schedule T) <b>Utilities</b>
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>09/19/2011</b>	Payee name <b>Sylvia Camarillo</b>
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Amount (\$) <b>\$100.00</b>	Payee address; City; State; Zip Code <b>10050 Great Hills Trail Austin, Texas 78759</b>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Event Expense</b>	Description (If travel outside of Texas, complete Schedule T) <b>Luncheon</b>
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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