

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

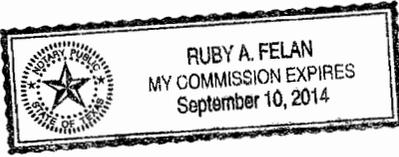
15 C/OH NAME	16 ACCOUNT # (Ethics Commission Filers)
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17 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> additional pages	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.	
	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

18 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 755.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 6,650.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ 122.58
	4. TOTAL POLITICAL EXPENDITURES	\$ 4,828.83
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 2,453.59
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0

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.



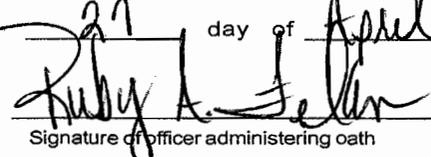
RUBY A. FELAN
MY COMMISSION EXPIRES
September 10, 2014



Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Adan Ballesteros, this the 27 day of April, 20 12, to certify which, witness my hand and seal of office.



Signature of officer administering oath

Ruby A. Felan

Printed name of officer administering oath

Court Clerk

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: 8	
2 FILER NAME Jaime A. BALLESTEROS		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 2-9-12	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerry & Linda W. Rieger Jr.	7 Amount of contribution (\$) 100.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 215 Remisula Dr. Burnet, TX		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4-1-12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C. or M. E. Mosqueda	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 9502 Mountain Quail Dr Austin, TX		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3-1-12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharon & Thomas Crane	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2150 Paradise Ridge Dr Round Rock, TX		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 2-21-12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruby Kellan	Amount of contribution (\$) 25.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1748 Ohlen Rd Austin, TX		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 2-21-12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) L. n T Edwards	Amount of contribution (\$) 25.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code Round Rock, TX		(If travel outside of Texas, complete Schedule T)	
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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME Jaime A. Ballesteros		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 2-10-12	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chris & Rachel HANSEN 6 Contributor address; City; State; Zip Code 605 Campfire Pflugerville, TX	7 Amount of contribution (\$) 100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 1-19-12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregory Papst Contributor address; City; State; Zip Code Cedar Park, TX	Amount of contribution (\$) 300.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 1-19-12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charlie Schmalz Contributor address; City; State; Zip Code 1301 S. IH 35 Austin, TX	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 2-19-12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jack & Julie Henderson Contributor address; City; State; Zip Code 113 Split Oak Dr. Pflugerville, TX	Amount of contribution (\$) 25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 1-20-12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Lipscombe Contributor address; City; State; Zip Code Austin, TX	Amount of contribution (\$) 50.00	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:	
2 FILER NAME <i>Jaime A. Ballesteros</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>1-19-12</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>David & Janice Henth</i>	7 Amount of contribution (\$) <i>50.00</i>	8 In-kind contribution description (if applicable)
	6 Contributor address; City; State; Zip Code <i>1204 Rutgers Dr. Pflugerville, TX</i>		
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>1-19-12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>John & Sue Anderson</i>	Amount of contribution (\$) <i>50.00</i>	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code <i>2920 Jan Dr. Pflugerville TX</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>1-19-12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Mary Throup</i>	Amount of contribution (\$) <i>50.00</i>	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code <i>11405 Monet Dr. Austin TX</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>1-19-12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Jackie Torres</i>	Amount of contribution (\$) <i>50.00</i>	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code <i>Round Rock, TX</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>1-19-12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>K. C. or L. Smith</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code <i>Pflugerville TX</i>		
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:	
2 FILER NAME <i>Jaime A. Ballesteros</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>1-19-12</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Victoria Outlaw</i>	7 Amount of contribution (\$) <i>1500.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>3207 Georgetown Beaumont, TX</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>1-19-12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Steven Adams</i>	Amount of contribution (\$) <i>30.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>Kirkcuney, TX</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>1-19-12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Robert Cadenhead</i>	Amount of contribution (\$) <i>50.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>3644 Ranch Creek Austin, TX</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>1-19-12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Fidel or Maria Acevedo</i>	Amount of contribution (\$) <i>25.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>3807 Prairie Ln Austin, TX</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>1-19-12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Thomas M. Meserole</i>	Amount of contribution (\$) <i>50.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1100 Westwood Pflugerville, TX</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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

2 FILER NAME **Jaime A. Ballesteros** 3 ACCOUNT # (Ethics Commission Filers)

4 Date 1-19-12	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gabriel Padilla	7 Amount of contribution (\$) 100.00	8 In-kind contribution description (if applicable)
	6 Contributor address; City; State; Zip Code Austin, Tx	(If travel outside of Texas, complete Schedule T)	

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

Date 1-20-12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marsha Norman	Amount of contribution (\$) 1500.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 2604 Gladys Beaumont, Tx	(If travel outside of Texas, complete Schedule T)	

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

Date 1-19-12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIKE or DEANNA Bessman	Amount of contribution (\$) 25.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 1504 Cosmos way Pflugerville, Tx	(If travel outside of Texas, complete Schedule T)	

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

Date 1-19-12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerald & Linda Spataro	Amount of contribution (\$) 25.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 701 Holly Court Pflugerville, Tx	(If travel outside of Texas, complete Schedule T)	

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

Date 1-19-12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAMES Lexville	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code Box 7019 Round Rock, Tx	(If travel outside of Texas, complete Schedule T)	

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

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME <i>Jaime A. Ballesteros</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>1-18-12</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Richard Schechter</i>	7 Amount of contribution (\$) <i>250.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>3207 Georgetown Houston TX</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>1-26-12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Kathleen & Ronald Woodard</i>	Amount of contribution (\$) <i>50.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>14612 Lupton Pflugerville TX</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>1-26-12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Cecelia Burke</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>6500 Santoloma Cove Austin TX</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2-22-12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Jack & Winifred Henderson</i>	Amount of contribution (\$) <i>25.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>113 Split Oak Pflugerville TX</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2-21-12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>James & Jonathan Wilkerson</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>804 Point Run Pflugerville TX</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME <i>Jaime A. Ballesteros</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>3-20-12</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>AFSCME</i>	7 Amount of contribution (\$) <i>1,000.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>1625 L St NW Washington DC</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>01-19-12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Ruby Belan</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable) <i>Food for Fundraiser</i>
Contributor address; City; State; Zip Code <i>Austin, TX</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>01-19-12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Dwight & Linda Bertson</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable) <i>Food & Drinks Fundraiser</i>
Contributor address; City; State; Zip Code <i>Pflugerville, TX</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>01-19-12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Julia Rust</i>	Amount of contribution (\$) <i>250.00</i>	In-kind contribution description (if applicable) <i>Venue Fundraiser</i>
Contributor address; City; State; Zip Code <i>Pflugerville, TX</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>01-19-12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Steve Cose</i>	Amount of contribution (\$) <i>350.00</i>	In-kind contribution description (if applicable) <i>Entertainment</i>
Contributor address; City; State; Zip Code <i>Pflugerville, TX</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME <i>Jaime A. Ballesteros</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>02-21-12</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Chelsey McMurtrie</i>	7 Amount of contribution (\$) <i>250.00</i>	8 In-kind contribution description (if applicable) <i>Venue/food drinks</i>
6 Contributor address; City; State; Zip Code <i>Pflugerville, TX</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>02-24-12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Steve Goe</i>	Amount of contribution (\$) <i>200.00</i>	In-kind contribution description (if applicable) <i>Music/Sound System</i>
Contributor address; City; State; Zip Code <i>Pflugerville, TX</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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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: 3		2 FILER NAME Jaime A. Ballesteros		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 02-12-12		5 Payee name Ace Printing			
6 Amount (\$) 200.00		7 Payee address; City; State; Zip Code Austin, Tx			
8 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) Re-Elect Stickers	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 03-24-12		Payee name Home Depot			
Amount (\$) 386.33		Payee address; City; State; Zip Code Austin, Tx			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) Sign Material	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 03-29-12		Payee name CASA GARCIA'S #3			
Amount (\$) 47.88		Payee address; City; State; Zip Code Hwy 70, Austin, Tx			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food Expense		Description (If travel outside of Texas, complete Schedule T) Block Walker's	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 04-03-12		Payee name Ace Printing			
Amount (\$) 2,165.00		Payee address; City; State; Zip Code Austin, Tx			
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	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME JAIME A. BALLESTEROS	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 04-09-12	5 Payee name Block Walkers
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6 Amount (\$) 100.00	7 Payee address; City; State; Zip Code Austin, Tx
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Block Walking Expense	(b) Description (If travel outside of Texas, complete Schedule T) Block Walkers
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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 04-03-12	Payee name Austin Shirt Works
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Amount (\$) 203.65	Payee address; City; State; Zip Code Austin, Tx
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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) Advertising
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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 04-05-12	Payee name Worley Printing Co.
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Amount (\$) 1,598.85	Payee address; City; State; Zip Code Austin, Tx
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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) Printing Cards
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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 04-12-12	Payee name Chuy's
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Amount (\$) 32.09	Payee address; City; State; Zip Code Austin, Tx
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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) Block Walking
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME <i>JAIME A. BALLESTEROS</i>	3 ACCOUNT # (Ethics Commission Filers)
4 Date <i>04-18-12</i>	5 Payee name <i>TRAVIS County Democratic Party</i>	
6 Amount (\$) <i>\$175.00</i>	7 Payee address; City; State; Zip Code <i>Austin, TX</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Advertising Expense</i>	(b) Description (If travel outside of Texas, complete Schedule T) <i>County Convention</i>
	Candidate / Officeholder name	Office sought Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date <i>04-21-12</i>	Payee name <i>Walmart</i>	
Amount (\$) <i>42.61</i>	Payee address; City; State; Zip Code <i>Austin, TX</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Event Expense</i>	Description (If travel outside of Texas, complete Schedule T) <i>County Convention</i>
	Candidate / Officeholder name	Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Candidate / Officeholder name	Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Candidate / Officeholder name	Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED