

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

7826

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

| | | | |
|---|---|--|-----------------------------------|
| The C/OH Instruction Guide explains how to complete this form. | | 1 ACCOUNT # (Ethics Commission Filers) 7663 | 2 Total pages filed: 16 |
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR FIRST MI Mr. Michael D. NICKNAME LAST SUFFIX Cargill | <div style="border: 1px solid black; padding: 5px;"> OFFICE USE ONLY Date Received: 2012 APR 30 PM 4:07 Date Hand Delivered or Postmarked: _____ Receipt #: _____ Amount: _____ Date Processed: _____ Date Imaged: _____ </div> <div style="writing-mode: vertical-rl; transform: rotate(180deg); font-weight: bold; font-size: 1.2em;"> FILED FOR RECORD Dana DeBeauvoir County Clerk Travis County Texas </div> | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 10701 Claywood Drive Austin, TX 78704 | | |
| 5 CANDIDATE / OFFICEHOLDER PHONE | AREA CODE PHONE NUMBER EXTENSION (214) 697-3111 | | |
| 6 CAMPAIGN TREASURER NAME | MS / MRS / MR FIRST MI Mr. Kory T. NICKNAME LAST SUFFIX Zipperen | | |
| 7 CAMPAIGN TREASURER ADDRESS (residence or business) | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 321 W Ben White Blvd Suite 203 Austin, TX 78704 | | |
| 8 CAMPAIGN TREASURER PHONE | AREA CODE PHONE NUMBER EXTENSION () 512-788-6998 | | |
| 9 REPORT TYPE | <input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR) | | |
| 10 PERIOD COVERED | Month Day Year THROUGH Month Day Year 01 / 01 / 2012 THROUGH 04 / 19 / 2012 | | |
| 11 ELECTION | ELECTION DATE Month Day Year 05 / 29 / 2012 | ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special | |
| 12 OFFICE | OFFICE HELD (if any) N/A | 13 OFFICE SOUGHT (if known) Travis County Constable Precinct 2 | |

GOTO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME Michael Cargill 15 ACCOUNT # (Ethics Commission Filers) 7663

16 NOTICE FROM POLITICAL COMMITTEE(S)

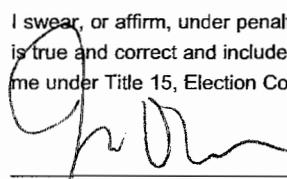
THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO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

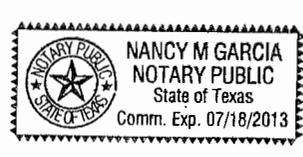
| | | |
|--|----------------|--------------------------------------|
| <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC <input type="checkbox"/> additional pages | COMMITTEE TYPE | COMMITTEE NAME |
| | | COMMITTEE ADDRESS |
| | | COMMITTEE CAMPAIGN TREASURER NAME |
| | | COMMITTEE CAMPAIGN TREASURER ADDRESS |

| | | |
|-------------------------|---|-----------|
| 17 CONTRIBUTION TOTALS | 1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED | \$ 0.00 |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$3436.98 |
| EXPENDITURE TOTALS | 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED | \$ 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$7108.58 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD | \$1320.23 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 0.00 |

18 AFFIDAVIT

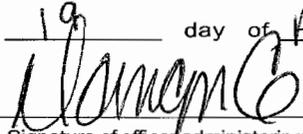
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.


Signature of Candidate or Officeholder



AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Michael Cargill, this the 19 day of April, 20 12, to certify which, witness my hand and seal of office.

 Signature of officer administering oath
Nancy M. Garcia Printed name of officer administering oath
Notary 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: **9**

2 FILER NAME **Michael Cargill**

3 ACCOUNT # (Ethics Commission Filers)
7663

4 Date
1-1-12

5 Full name of contributor out-of-state PAC (ID#: _____)
Carl Meyer

7 Amount of contribution (\$)
40.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

**4505 Spicewood Rd
Johnson City, TX 78669**

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

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

Amount of contribution (\$)

In-kind contribution description (if applicable)

1-7-12

Geoffrey Fields
Contributor address; City; State; Zip Code

10.00

**3016 Guadalupe St #217
Austin, TX 78705**

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Amount of contribution (\$)

In-kind contribution description (if applicable)

1-13-12

Katie Wilhite
Contributor address; City; State; Zip Code

25.00

**1040 Kensington Castle Trail
Pflugerville, TX 78660**

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Amount of contribution (\$)

In-kind contribution description (if applicable)

1-18-12

Bruce and Kirsten EPPinger
Contributor address; City; State; Zip Code

100.00

**1620 Kingston Lacy Blvd
Pflugerville, TX 78660**

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Amount of contribution (\$)

In-kind contribution description (if applicable)

1-20-12

Gerald D. Swank
Contributor address; City; State; Zip Code

300.00

**PO Box 837
Austin, TX 78767**

(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

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 Michael Cargill | | 3 ACCOUNT # (Ethics Commission Filers) 7663 | |
| 4 Date 2-1-12 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geoffrey Fields | 7 Amount of contribution (\$) 24.98 | 8 In-kind contribution description (if applicable) Facebook ads |
| 6 Contributor address; City; State; Zip Code 3016 Guadalupe St. #217 Austin, TX 78705 | | (If travel outside of Texas, complete Schedule T) | |
| 9 Principal occupation / Job title (See Instructions) | | 10 Employer (See Instructions) | |
| Date 2-12-12 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellie Meyer | Amount of contribution (\$) 2.00 | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code 2612 San Pedro Unit 112 Austin, TX 78705 | | (If travel outside of Texas, complete Schedule T) | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 2-12-12 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kris Bailey | Amount of contribution (\$) 25.00 | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code 8418 Spring Valley Dr. Austin, TX 78736 | | (If travel outside of Texas, complete Schedule T) | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 2-12-12 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kory Zipperer | Amount of contribution (\$) 15.00 | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code 1301 Crossing Pl #2031 Austin, TX 78741 | | (If travel outside of Texas, complete Schedule T) | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 2-12-12 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geoffrey Fields | Amount of contribution (\$) 45.00 | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code 3016 Guadalupe St #217 Austin, TX 78705 | | (If travel outside of Texas, complete Schedule T) | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| <p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p> | | | |

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 Michael Cargill | | 3 ACCOUNT # (Ethics Commission Filers) 7663 | |
| 4 Date 2-12-12 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armando Coballero | 7 Amount of contribution (\$) 45.00 | 8 In-kind contribution description (if applicable) |
| 6 Contributor address; City; State; Zip Code 701 center Ridge Dr. #624 Austin, TX 78753 | | (If travel outside of Texas, complete Schedule T) | |
| 9 Principal occupation / Job title (See Instructions) | | 10 Employer (See Instructions) | |
| Date 2-12-12 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blake Rufard | Amount of contribution (\$) 15.00 | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code 18202 Longmoor Dr. Houston, TX 77084 | | (If travel outside of Texas, complete Schedule T) | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 2-12-12 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert Love | Amount of contribution (\$) 15.00 | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code 5612 E. MLK Blvd Austin, TX 78121 | | (If travel outside of Texas, complete Schedule T) | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 2-12-12 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Justin-Blair Wofford | Amount of contribution (\$) 15.00 | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code 3535 Hadley Pl Snellville, GA 30039 | | (If travel outside of Texas, complete Schedule T) | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 2-12-12 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tyler Greeve | Amount of contribution (\$) 15.00 | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code 3205 Rockhurst Lane Austin, TX 78723 | | (If travel outside of Texas, complete Schedule T) | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| <p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p> | | | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A: <u>9</u> | |
| 2 FILER NAME <u>Michael Corgill</u> | | 3 ACCOUNT # (Ethics Commission Filers) <u>7663</u> | |
| 4 Date <u>2-12-12</u> | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Bernard Chala</u> | 7 Amount of contribution (\$) <u>30.00</u> | 8 In-kind contribution description (if applicable) |
| 6 Contributor address; City; State; Zip Code <u>10701 Claywood Dr. Austin, TX 78753</u> | | (If travel outside of Texas, complete Schedule T) | |
| 9 Principal occupation / Job title (See Instructions) | | 10 Employer (See Instructions) | |
| Date <u>2-12-12</u> | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Nancy Garcia</u> | Amount of contribution (\$) <u>30.00</u> | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code <u>6718 Murphy Farm San Antonio, TX 78239</u> | | (If travel outside of Texas, complete Schedule T) | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date <u>2-12-12</u> | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Gabriel Massiate</u> | Amount of contribution (\$) <u>15.00</u> | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code <u>10708 Claywood Dr Austin, TX 78753</u> | | (If travel outside of Texas, complete Schedule T) | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date <u>2-12-12</u> | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Robert Greene</u> | Amount of contribution (\$) <u>15.00</u> | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code <u>P.O. Box 399 Mancha Co, TX 78652</u> | | (If travel outside of Texas, complete Schedule T) | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date <u>2-12-12</u> | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Joshua Alvarado</u> | Amount of contribution (\$) <u>15.00</u> | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code <u>2010 E. 10th St Austin, TX 78702</u> | | (If travel outside of Texas, complete Schedule T) | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| <p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p> | | | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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| The Instruction Guide explains how to complete this form. | 1 Total pages Schedule A: 9 |
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| 2 FILER NAME Michael Cargill | 3 ACCOUNT # (Ethics Commission Filers) 7663 |
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| 4 Date 2-12-12 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Jose Nino | 7 Amount of contribution (\$) 15.00 | 8 In-kind contribution description (if applicable) |
| 6 Contributor address; City; State; Zip Code 1016 Camino La Costa #1302 Austin, TX 78752 | | (If travel outside of Texas, complete Schedule T) | |

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| 9 Principal occupation / Job title (See Instructions) | 10 Employer (See Instructions) |
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| Date 2-12-12 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Travis Shavelly | Amount of contribution (\$) 15.00 | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code 2006 A Kenneth Ave Austin, TX 78741 | | (If travel outside of Texas, complete Schedule T) | |

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| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
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| Date 2-12-12 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Roger Santos | Amount of contribution (\$) 15.00 | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code 10708 Claywood Dr. Austin, TX 78753 | | (If travel outside of Texas, complete Schedule T) | |

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| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
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| Date 2-12-12 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Matthew Flichbaum | Amount of contribution (\$) 15.00 | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code 701 Center Ridge Dr. #1036 Austin, TX 78753 | | (If travel outside of Texas, complete Schedule T) | |

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|---|-----------------------------|
| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
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| Date 2-12-12 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Damon Powell | Amount of contribution (\$) 15.00 | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code 10708 Claywood Dr. Austin, TX 78753 | | (If travel outside of Texas, complete Schedule T) | |

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|---|-----------------------------|
| 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: <u>9</u> | |
| 2 FILER NAME <u>Michael Cargill</u> | | 3 ACCOUNT # (Ethics Commission Filers) <u>7663</u> | |
| 4 Date <u>2-12-12</u> | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Elmer chen</u> | 7 Amount of contribution (\$) <u>30.00</u> | 8 In-kind contribution description (if applicable) |
| 6 Contributor address; City; State; Zip Code <u>6200 Diamond Head Cir Austin, TX 78746</u> | | (If travel outside of Texas, complete Schedule T) | |
| 9 Principal occupation / Job title (See Instructions) | | 10 Employer (See Instructions) | |
| Date <u>2-12-12</u> | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Joeshh Ferris</u> | Amount of contribution (\$) <u>15.00</u> | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code <u>3707 Manchaca Rd Austin, TX 78704</u> | | (If travel outside of Texas, complete Schedule T) | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date <u>2-12-12</u> | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Kevin Cress</u> | Amount of contribution (\$) <u>15.00</u> | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code <u>304 East 33rd St. # 7 Austin, TX 78705</u> | | (If travel outside of Texas, complete Schedule T) | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date <u>2-12-12</u> | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Joqueelyn Milk</u> | Amount of contribution (\$) <u>15.00</u> | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code <u>10427 Wolftrap Dr. Austin, TX 78749</u> | | (If travel outside of Texas, complete Schedule T) | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date <u>2-12-12</u> | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Clark Kocurek</u> | Amount of contribution (\$) <u>15.00</u> | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code <u>5304 Indio Dr Side A Austin, TX 78745</u> | | (If travel outside of Texas, complete Schedule T) | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| <p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p> | | | |

**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 Michael Cargill | | 3 ACCOUNT # (Ethics Commission Filers) 7663 | |
| 4 Date 2-12-12 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Devin Towle | 7 Amount of contribution (\$) 15.00 | 8 In-kind contribution description (if applicable) |
| 6 Contributor address; City; State; Zip Code 2812 Rio Grande St. #203 Austin, TX 78705 | | (If travel outside of Texas, complete Schedule T) | |
| 9 Principal occupation / Job title (See Instructions) | | 10 Employer (See Instructions) | |
| Date 2-12-12 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Cargill | Amount of contribution (\$) 30.00 | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code 10701 Claywood Dr. Austin, TX 78753 | | (If travel outside of Texas, complete Schedule T) | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 2-12-12 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Debbie Russell | Amount of contribution (\$) 15.00 | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code 2311 Riverside Farms Rd Austin, TX 78741 | | (If travel outside of Texas, complete Schedule T) | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 2-12-12 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitney Fields | Amount of contribution (\$) 15.00 | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code 3016 Guadalupe St. #217 Austin, TX 78705 | | (If travel outside of Texas, complete Schedule T) | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 2-12-12 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blanca Chola | Amount of contribution (\$) 15.00 | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code 2908 Red Bud Ln Round Rock, TX 78664 | | (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

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 Michael Cargill 3 ACCOUNT # (Ethics Commission Filers)
7663

| | | | |
|--|---|---|--|
| 4 Date <u>2-15-12</u> | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Zachary Colvent</u> | 7 Amount of contribution (\$) <u>100.00</u> | 8 In-kind contribution description (if applicable) |
| 6 Contributor address; City; State; Zip Code <u>12340 Alameda Trace Cir. #2202 Austin, TX 78727</u> | | (If travel outside of Texas, complete Schedule T) | |

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

| | | | |
|---|--|---|--|
| Date <u>2-15-12</u> | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Willie Wofford</u> | Amount of contribution (\$) <u>100.00</u> | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code <u>3535 Hadley Place Snellville, GA 30039</u> | | (If travel outside of Texas, complete Schedule T) | |

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

| | | | |
|---|---|---|--|
| Date <u>2-15-12</u> | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Scott Lewis</u> | Amount of contribution (\$) <u>25.00</u> | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code <u>4713 Cap Rock Dr. Austin, TX 78735</u> | | (If travel outside of Texas, complete Schedule T) | |

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

| | | | |
|---|--|---|--|
| Date <u>3-1-12</u> | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Richard Forkas</u> | Amount of contribution (\$) <u>10.00</u> | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code <u>P.O. Box 2075 Pflugerville, TX 78691</u> | | (If travel outside of Texas, complete Schedule T) | |

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

| | | | |
|---|---|---|--|
| Date <u>3-8-12</u> | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Danny Mathews</u> | Amount of contribution (\$) <u>100.00</u> | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code <u>809 Plum bago Dr. Pflugerville, TX 78660</u> | | (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
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: <u>9</u> | |
| 2 FILER NAME <u>Michael Cargill</u> | | 3 ACCOUNT # (Ethics Commission Filers) <u>7663</u> | |
| 4 Date <u>3-9-12</u> | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Joe Gleinser</u> | 7 Amount of contribution (\$) <u>100.00</u> | 8 In-kind contribution description (if applicable) |
| 6 Contributor address; City; State; Zip Code <u>3418 Foothill Terrace Austin, TX 78731</u> | | (If travel outside of Texas, complete Schedule T) | |
| 9 Principal occupation / Job title (See Instructions) | | 10 Employer (See Instructions) | |
| Date <u>3-13-12</u> | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Kim Ransom</u> | Amount of contribution (\$) <u>200.00</u> | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code <u>2995 Ashly Woods Court Snellville, GA 30078</u> | | (If travel outside of Texas, complete Schedule T) | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date <u>4-3-12</u> | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Jacob Warnock</u> | Amount of contribution (\$) <u>500.00</u> | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code <u>PO Box 9285 Wichita Falls, TX 76308</u> | | (If travel outside of Texas, complete Schedule T) | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date <u>4-17-12</u> | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Texas Democratic Party</u> | Amount of contribution (\$) <u>1250.00</u> | In-kind contribution description (if applicable) <u>Voter File Access</u> |
| Contributor address; City; State; Zip Code <u>505 West 12th St. Suite 200 Austin, Texas 78701</u> | | (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) | |
| <p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p> | | | |

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: 1 | 2 FILER NAME Michael Cargill | 3 ACCOUNT # (Ethics Commission Filers) 7663 |
| 4 Date 2-13-12 | 5 Payee name Sou Pavlo's Restaurante | |
| 6 Amount (\$) 368.05 | 7 Payee address; City; State; Zip Code 2809 San Jacinto Boulevard Austin, TX 78705 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See categories listed at the top of this schedule) Food Expense | (b) Description (If travel outside of Texas, complete Schedule T) Fundraiser Event |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name Office sought Office held |
| Date 4-3-12 | Payee name U.S. Postal Service | |
| Amount (\$) 490.00 | Payee address; City; State; Zip Code GMF Station Austin, TX 78710-9765 | |
| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule) Advertising Expense | Description (If travel outside of Texas, complete Schedule T) Postage |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name Office sought Office held |
| Date 4-3-12 | Payee name U.S. Postal Service | |
| Amount (\$) 225.00 | Payee address; City; State; Zip Code Southeast Station Austin, TX 78744-9998 | |
| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule) Advertising Expense | Description (If travel outside of Texas, complete Schedule T) Postage |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name Office sought Office held |
| Date 4-19-12 | Payee name U.S. Postal Service | |
| Amount (\$) 110.00 | Payee address; City; State; Zip Code GMF Station Austin, TX 78710-9765 | |
| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule) Advertising Expense | Description (If travel outside of Texas, complete Schedule T) Postage |
| | 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 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.

| | | |
|--|--|---|
| 1 Total pages Schedule G: 4 | 2 FILER NAME Michael Corgill | 3 ACCOUNT # (Ethics Commission Filers) 7663 |
| 4 Date 1-10-12 | 5 Payee name. Advaron Marketing and Consulting | |
| 6 Amount (\$) 130.00 <input type="checkbox"/> Reimbursement from political contributions intended | 7 Payee address; City; State; Zip Code 916 Rochester Castle Way Pflugerville, Tx 78660 | |
| 8 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) Newspaper Ads |
| Date 1-19-12 | Payee name Signs on the Spot, LLC | |
| Amount (\$) 739.71 <input type="checkbox"/> Reimbursement from political contributions intended | Payee address; City; State; Zip Code 3303 Rosefinch trail Austin, tx 78746 | |
| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule) Advertising Expense | Description (If travel outside of Texas, complete Schedule T) Signs |
| Date 1-25-12 | Payee name Office Max | |
| Amount (\$) 20.33 <input type="checkbox"/> Reimbursement from political contributions intended | Payee address; City; State; Zip Code I35 and Parmar Lane Austin, TX 78753 | |
| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule) Advertising Expense | Description (If travel outside of Texas, complete Schedule T) Paper |
| Date 1-28-12 | Payee name office Max | |
| Amount (\$) 51.61 <input type="checkbox"/> Reimbursement from political contributions intended | Payee address; City; State; Zip Code I35 and Parmar Lane Austin, TX 78753 | |
| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule) Advertising Expense | Description (If travel outside of Texas, complete Schedule T) Paper |

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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.

| | | |
|--|---|--|
| 1 Total pages Schedule G: 4 | 2 FILER NAME Michael Cargill | 3 ACCOUNT # (Ethics Commission Filers) 7663 |
| 4 Date 2-17-12 | 5 Payee name Advaron Marketing and Consulting | |
| 6 Amount (\$) \$ 5.00 <input type="checkbox"/> Reimbursement from political contributions intended | 7 Payee address; City; State; Zip Code 916 Rochester Castle way Pflugerville, TX 78660 | |
| 8 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) Newspaper Ads |
| Date 3-9-12 | Payee name Golden Wok | |
| Amount (\$) 113.51 <input type="checkbox"/> Reimbursement from political contributions intended | Payee address; City; State; Zip Code 500 W Canyon Ridge Rd # 1 Austin, TX 78753 | |
| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule) Food Expense | Description (If travel outside of Texas, complete Schedule T) Staff Meeting |
| Date 3-12-12 | Payee name Advaron Marketing and Consulting | |
| Amount (\$) 60.00 <input type="checkbox"/> Reimbursement from political contributions intended | Payee address; City; State; Zip Code 916 Rochester Castle Way Pflugerville, TX 78660 | |
| 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 |
| Date 2-28-12 | Payee name Signs on the spot, LLC | |
| Amount (\$) 700.00 <input type="checkbox"/> Reimbursement from political contributions intended | Payee address; City; State; Zip Code 3303 Rose Finch Trail Austin, TX 78746 | |
| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule) Advertising Expense | Description (If travel outside of Texas, complete Schedule T) Signs |

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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.

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|---------------------------------------|--|---|
| 1 Total pages Schedule G: 4 | 2 FILER NAME Michael Cargill | 3 ACCOUNT # (Ethics Commission Filers) 7663 |
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| 4 Date 3-15-12 | 5 Payee name Signs on the spot, LLC |
|--------------------------|---|

| | |
|--|---|
| 6 Amount (\$) 779.42 <input type="checkbox"/> Reimbursement from political contributions intended | 7 Payee address; City; State; Zip Code 3303 Rosefinch Trail Austin, TX 78746 |
|--|---|

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| 8 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) Signs |
|---------------------------------|--|---|

| | |
|-----------------|---|
| Date 3-27-12 | Payee name SynergyX Illumination and Power |
|-----------------|---|

| | |
|---|---|
| Amount (\$) 833.53 <input type="checkbox"/> Reimbursement from political contributions intended | Payee address; City; State; Zip Code 1007 S. Congress Ave #816 Austin, TX 78704 |
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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) Signs |
|------------------------|---|--|

| | |
|-----------------|----------------------------|
| Date 3-29-12 | Payee name Office Depot |
|-----------------|----------------------------|

| | |
|--|---|
| Amount (\$) 88.21 <input type="checkbox"/> Reimbursement from political contributions intended | Payee address; City; State; Zip Code 500 East Ben White Building E Suite 200 Austin, TX 78704 |
|--|---|

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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) Mailing Material |
|------------------------|---|---|

| | |
|-----------------|----------------------------|
| Date 3-31-12 | Payee name Office Depot |
|-----------------|----------------------------|

| | |
|---|---|
| Amount (\$) 220.69 <input type="checkbox"/> Reimbursement from political contributions intended | Payee address; City; State; Zip Code 500 East Ben White Building E Suite 200 Austin, TX 78704 |
|---|---|

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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) Mailing Material |
|------------------------|---|---|

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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.

| | | |
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| 1 Total pages, Schedule G: 4 | 2 FILER NAME Michael Cargill | 3 ACCOUNT # (Ethics Commission Filers) 7663 |
|--|--|---|

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|-------------------------|-------------------------------------|
| 4 Date 4-5-12 | 5 Payee name Office Depot |
|-------------------------|-------------------------------------|

| | |
|--|---|
| 6 Amount (\$) 833.52 <input type="checkbox"/> Reimbursement from political contributions intended | 7 Payee address; City; State; Zip Code 500 East Ben White Building E Suite 200 Austin, TX 78704 |
|--|---|

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| 8 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) Mailing Material |
|--------------------------|--|--|

| | |
|------------------------|---------------------------|
| Date 4-10-12 | Payee name KXAN |
|------------------------|---------------------------|

| | |
|--|--|
| Amount (\$) 750.00 <input type="checkbox"/> Reimbursement from political contributions intended | Payee address; City; State; Zip Code 908 West Martin Luther King Jr. Blvd Austin, TX 78705 |
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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) Video Ads |
|------------------------|--|---|

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| Date 4-19-12 | Payee name Texas Democratic Party |
|------------------------|---|

| | |
|--|---|
| Amount (\$) 350.00 <input type="checkbox"/> Reimbursement from political contributions intended | Payee address; City; State; Zip Code 505 West 12th St. Suite 200 Austin, TX 78701 |
|--|---|

| | | |
|------------------------|---|--|
| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule) Contribution | Description (If travel outside of Texas, complete Schedule T) Donation |
|------------------------|---|--|

| | |
|------------------------|---|
| Date 4-10-12 | Payee name AdVavon Marketing and Consulting |
|------------------------|---|

| | |
|--|--|
| Amount (\$) 160.00 <input type="checkbox"/> Reimbursement from political contributions intended | Payee address; City; State; Zip Code 916 Rochester Castle Way Pflugerville, TX 78660 |
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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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