

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

7964

FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers) 00232323	2 PAGE # 1 of 31
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mrs.	FIRST Karen L.	MI
	NICKNAME	LAST Huber	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX;	APT / SUITE #;	CITY; STATE; ZIP CODE
	P. O. Box 302495 Austin, TX 78703		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Joseph G.	MI
	NICKNAME	LAST Pickle	SUFFIX
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE		
	110 Las Lomas Austin, TX 78746		
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
(512) 327-2403			
8 REPORT TYPE	<input type="checkbox"/> January 15	<input checked="" type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff
	<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded \$500 limit
<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)			
<input type="checkbox"/> Final report (Attach C/OH - FR)			
9 PERIOD COVERED	Month	Day	Year
	07/01/2012		THROUGH
		Month	Day
		09/27/2012	
10 ELECTION	ELECTION DATE		ELECTION TYPE
	Month	Day	Year
11/06/2012		<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff
		<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special
11 OFFICE	OFFICE HELD (if any) Travis Co. Commissioner Pct. 3		12 OFFICE SOUGHT (if known)

OFFICE USE ONLY

Date Received

FILED FOR RECORD
2012 OCT -9 PM 5:50
Dana DeBeauvoir
County Clerk
Travis County
Texas

Date Hand-delivered or Date Postmarked

Receipt #

Amount

Date Processed

Date Imaged

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

13 C/OH NAME Huber, Karen L. (Mrs.)	14 ACCOUNT # (Ethics Commission filers) 00232323
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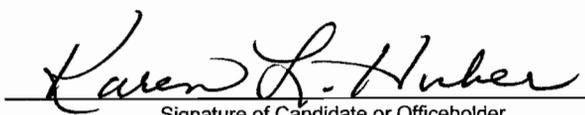
15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> additional pages	.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..	
	<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	1,316.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	93,103.50
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	14.98
	4. TOTAL POLITICAL EXPENDITURES	\$	92,560.09
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	51,851.51
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

17 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 Karen L. Huber, this the 9th day of October, 2012, to certify which, witness my hand and seal of office.


 Signature of officer administering oath

Julie Anne Wheeler

 Print name of officer administering oath

Notary Public, State of Texas

 Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/18 Report: 3/31	
2 FILER NAME Huber, Karen L. (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00232323	
4 Date 09/11/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Alsup, Marion (Ms.) 6 Contributor address; City; State; Zip Code 2311 Pruett St. Austin, TX 78703	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 09/27/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ayres, Patricia (Ms.) 6 Contributor address; City; State; Zip Code 5705 Scout Island Cove Austin, TX 78731	7 Amount of contribution (\$) \$1,000.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 09/22/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ayres, Robert (Mr.) 6 Contributor address; City; State; Zip Code 2408 Keating Ln. Austin, TX 78703	7 Amount of contribution (\$) \$2,500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 09/14/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Barnes, Patricia (Ms.) 6 Contributor address; City; State; Zip Code 309 Nixon St. Austin, TX 78746	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 09/21/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Beaudin, Christine (Ms.) 6 Contributor address; City; State; Zip Code 4908 Canyon Ranch Trail Spicewood, TX 78669	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/18 Report: 4/31	
2 FILER NAME Huber, Karen L. (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00232323	
4 Date 09/25/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Beaver, Becky (Ms.) 6 Contributor address; City; State; Zip Code 816 Congress Ave. Suite 1600 Austin, TX 78701	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/27/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Biggs, Glenn (Mrs.) Contributor address; City; State; Zip Code 2 Glendalough Ct. San Antonio, TX 78209	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/27/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bingham, Bill (Mr.) Contributor address; City; State; Zip Code 612 East 43rd St. Austin, TX 78751	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/27/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bone, Barry (Mr.) Contributor address; City; State; Zip Code 6 Rock Way Cove Austin, TX 78746	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/24/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bracewell & Giuliani Committee Contributor address; City; State; Zip Code 711 Louisiana, St., Ste. 2300 Houston, TX 77002	Amount of contribution (\$) \$2,500.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/18 Report: 5/31	
2 FILER NAME Huber, Karen L. (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00232323	
4 Date 09/14/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Briggs, Rambie 6 Contributor address; City; State; Zip Code 22017 Redbird Dr Lago Vista, TX 78645	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/22/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bristol, Valarie Contributor address; City; State; Zip Code 512 Bullian Ln Austin, TX 78746	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/29/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bullock, Dan Contributor address; City; State; Zip Code PO Box 5627 Austin, TX 78763	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/27/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Capital Area Democratic Women Contributor address; City; State; Zip Code P.O. BOX 12962 Austin, TX 78711	Amount of contribution (\$) \$2,000.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/23/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ceshker, Gregory Contributor address; City; State; Zip Code 106 Saddlehorn Dr. Dripping Springs, TX 78627-8701	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/18 Report: 6/31	
2 FILER NAME Huber, Karen L. (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00232323	
4 Date 09/08/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cespedes, Benny (Mr.) 6 Contributor address; City; State; Zip Code 7300 Callbram lane Austin, TX 78736	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 08/10/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Circle C Area Democrats Contributor address; City; State; Zip Code 6707 Oasis Dr. Austin, TX 78749	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 09/22/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Claunch, David (Mr.) Contributor address; City; State; Zip Code 305 Mc Connell Dr. Austin, TX 78746	Amount of contribution (\$) \$2,500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 09/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Claypool, James Contributor address; City; State; Zip Code 5009 Little Creek Trail Spicewood, TX 78669	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 09/11/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Clayton, Nan Contributor address; City; State; Zip Code 2909 Oak Lane Dr. Austin, TX 78704	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/18 Report: 7/31	
2 FILER NAME Huber, Karen L. (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00232323	
4 Date 09/25/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Clayton, Nan 6 Contributor address; City; State; Zip Code 2909 Oak Lane Dr. Austin, TX 78704	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 09/20/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Covington, Sidney (Mr.) Contributor address; City; State; Zip Code 4810 Placid Pl. Sustin, TX 78731	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 09/22/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Daughety, Ann Contributor address; City; State; Zip Code 4001 Eagles Landing Cv Austin, TX 78735	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 09/24/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Davis, Robert (Mr.) Contributor address; City; State; Zip Code 3607 Pinnacle Rd. # 3 Austin, TX 78746	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 09/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dickie, Martha (Mrs.) Contributor address; City; State; Zip Code 503 Brookhaven Trail Austin, TX 78746	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/18 Report: 8/31	
2 FILER NAME Huber, Karen L. (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00232323	
4 Date 09/22/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dries, Laurie (Ms.) 6 Contributor address; City; State; Zip Code 1901 Toro Canyon Rd. Unit B Austin, TX 78746	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/10/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dyניה, Thomas (Mr.) Contributor address; City; State; Zip Code 3207 China Grove Austin, TX 78745	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/20/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Eason, Patty (Ms.) Contributor address; City; State; Zip Code 1401S. College St. Georgetown, TX 78626	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/06/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Eskridge, Nancy (Ms.) Contributor address; City; State; Zip Code 2304 Standish Austin, TX 78745	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/21/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fatzer, Sylvia Contributor address; City; State; Zip Code 2003 Red Fox Rd Austin, TX 78734	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/18 Report: 9/31	
2 FILER NAME Huber, Karen L. (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00232323	
4 Date 09/12/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ford, Tara (Ms.) 6 Contributor address; City; State; Zip Code 10609 Beard Ave. Austin, TX	7 Amount of contribution (\$) \$2,437.50	8 In-kind contribution description (if applicable) Website development, signage design (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/22/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Friday, Philip Jr. Contributor address; City; State; Zip Code 700 Lavaca St Ste 1150 Austin, TX 78701	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/24/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gagarin, Michael (Mr.) Contributor address; City; State; Zip Code Classics Dept. C3400 Austin, TX 78712	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/21/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hanson, Richard (Ms.) Contributor address; City; State; Zip Code 16400 Hamilton Pool Rd. Austin, TX 78738	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/17/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hargis, Sharron (Ms.) Contributor address; City; State; Zip Code 7705 Whitson Dr. Austin, TX 78749	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 9/18 Report: 11/31	
2 FILER NAME Huber, Karen L. (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00232323	
4 Date 09/12/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) House, Randall (Mr.) 6 Contributor address; City; State; Zip Code 13412 Saddle Back Pass Austin, TX 78738	7 Amount of contribution (\$) \$26,150.00	8 In-kind contribution description (if applicable) Development of website & print ads (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/22/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kallerman, Richard Contributor address; City; State; Zip Code 2510 Cedarview Dr Austin, TX 78704	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/25/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kaplan, Austin (Mr.) Contributor address; City; State; Zip Code 1200 Barton Hills Dr. Austin, TX 78704	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/25/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Keith, Barker II (Mr.) Contributor address; City; State; Zip Code PO Box 342348 Lakeway, TX 78734	Amount of contribution (\$) \$400.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/27/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kitchen, Ann Contributor address; City; State; Zip Code 2401 Briargrove Austin, TX 78704	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 10/18 Report: 12/31	
2 FILER NAME Huber, Karen L. (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00232323	
4 Date 09/01/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lipscombe, John 6 Contributor address; City; State; Zip Code 6600 Mesa Dr Austin, TX 78731	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/20/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lloyd, Margaret (Ms.) Contributor address; City; State; Zip Code 9005 Jamaica Bch Galveston, TX 77554	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/21/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lorenz, Perry (Mr.) Contributor address; City; State; Zip Code 1311 E 6th St Ste A Austin, TX 78702	Amount of contribution (\$) \$2,500.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/30/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lovell, James Contributor address; City; State; Zip Code 1804 Yaupon Valley Rd Austin, TX 78746	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/10/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lowerre, Richard (Mr.) Contributor address; City; State; Zip Code Austin 78703,	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 11/18 Report: 13/31	
2 FILER NAME Huber, Karen L. (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00232323	
4 Date 09/13/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lyon, Barry 6 Contributor address; City; State; Zip Code 2209 Southern Oaks Dr Austin, TX 78745	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/21/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mc Creary, Frank III Contributor address; City; State; Zip Code 2020 Rice Blvd Houston, TX 77005	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/19/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McBride, Joe (Mr.) Contributor address; City; State; Zip Code 2915 San Gabriel St. Austin, TX 78705	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/27/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McBride, Joe (Mr.) Contributor address; City; State; Zip Code 6202 Shoal Creek W. Dr. Austin, TX 78757	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/16/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moore, Joseph (Mr.) Contributor address; City; State; Zip Code 2001 Ford St. Austin, TX 78704	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 12/18 Report: 14/31	
2 FILER NAME Huber, Karen L. (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00232323	
4 Date 07/14/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morton, Peggy (Ms.) 6 Contributor address; City; State; Zip Code 3514 IPinnacle Austin, TX 78746	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/17/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Niland, Nona MD Contributor address; City; State; Zip Code 3939 Bee Cave Rd Bldg C-100 Austin, TX 78746	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/25/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Norwood, Jane Contributor address; City; State; Zip Code 4500 Eagles Landing Dr Austin, TX 78735	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/14/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nowlin, Bettye (Mrs.) Contributor address; City; State; Zip Code 3327 Far View Drive Austin, TX 78730	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/26/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nyer, Genie (Ms.) Contributor address; City; State; Zip Code 206 Ashworth Dr. Austin, TX 78746	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 14/18 Report: 16/31	
2 FILER NAME Huber, Karen L. (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00232323	
4 Date 09/21/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Phillips, James (Mr.) 6 Contributor address; City; State; Zip Code 25008 Pedernales Canyon Trl. Spicewood, TX 78669	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 09/25/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pinnelli, Janis (Mrs.) Contributor address; City; State; Zip Code PO Box 50038 Austin, TX 78763	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/19/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Portman, Michael (Mr.) Contributor address; City; State; Zip Code 901 W 9th St. # 308 Austin, TX 78703	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/27/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Prager, Herman III (Mr.) Contributor address; City; State; Zip Code 8600 Ranch Road 620 No. Apt 210 Austin, TX 78726	Amount of contribution (\$) \$75.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/22/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Prudhomme, Gilbert m (Mr.) Contributor address; City; State; Zip Code 8217 Shoal Creek Blvd. Ste. 104 Austin, TX 78757	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 15/18 Report: 17/31	
2 FILER NAME Huber, Karen L. (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00232323	
4 Date 09/24/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reed, Pam (Ms.) 6 Contributor address; City; State; Zip Code 1503 Harbor View Austin, TX 78746	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reese, Pamela (;ms) Contributor address; City; State; Zip Code 3511 Westlake Dr. Austin, TX 78746	Amount of contribution (\$) \$10,000.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/27/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Roth, Daniel (Mr.) Contributor address; City; State; Zip Code 1503 Wildcat Hollow Austin, TX 78746	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/27/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sanger, Mary Contributor address; City; State; Zip Code 704 Carolyn Ave Austin, TX 78705	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/25/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Schmidli, Lisette Contributor address; City; State; Zip Code 3656 Ranch Creek Austin, TX 78730	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 16/18 Report: 18/31	
2 FILER NAME Huber, Karen L. (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00232323	
4 Date 09/11/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Scott, Marilyn (Ms.) 6 Contributor address; City; State; Zip Code 11512 Tin Cup Apt. 111 Austin, TX 78750	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 08/28/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shiple, George 6 Contributor address; City; State; Zip Code 919 Congress Ave Ste 919 Austin, TX 78701	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 09/22/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Siff, Theodore 6 Contributor address; City; State; Zip Code 604 W 11th St Austin, TX 78701	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 09/22/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smiley, Martha 6 Contributor address; City; State; Zip Code 413 W Live Oak Austin, TX 78704	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 08/27/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Craig (Mr.) 6 Contributor address; City; State; Zip Code 1908 Barton Pkwy. Austin, TX 78704	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 17/18 Report: 19/31	
2 FILER NAME Huber, Karen L. (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00232323	
4 Date 09/25/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Spelman, Niyanta (Ms.) 6 Contributor address; City; State; Zip Code 3802 Avenue F Austin, TX 78751	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 09/14/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Starnes, Debra (Ms.) Contributor address; City; State; Zip Code 2509 Sailpoint Dr. Spicewood, TX 78669	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 09/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tovo, Kathrine (Ms.) Contributor address; City; State; Zip Code 809 West 32nd St. Austin, TX 78705	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 07/19/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Vaughan, Ben III Contributor address; City; State; Zip Code 2403 Sweetbrush Dr Austin, TX 78703	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 09/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Winkler, Hugh Contributor address; City; State; Zip Code 9510 Mor Dr Dripping Springs, TX 78620	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 18/18 Report: 20/31	
2 FILER NAME Huber, Karen L. (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00232323	
4 Date 09/12/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Yost, Nathan (Mr.) 6 Contributor address; City; State; Zip Code 1818 Travis Heights Blvd. Austin, TX 78704	7 Amount of contribution (\$) \$19,575.00	8 In-kind contribution description (if applicable) Website development, signage design (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/10 Report: 21/31		2 FILER NAME Huber, Karen L. (Mrs.)		3 ACCOUNT # (TEC filers) 00232323	
4 Date 08/06/2012	5 Payee name American Express				
6 Amount (\$) \$0.87	7 Payee address City; State; Zip Code P.O. Box 53852 Phoenix, AZ 85072-3852				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit card merchant account fees		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 07/20/2012	Payee name AT & T				
Amount (\$) \$43.05	Payee address City; State; Zip Code P. O. BOX 5001 Carol Stream, IL 60197-5001				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign telephone		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 08/24/2012	Payee name AT & T				
Amount (\$) \$43.00	Payee address City; State; Zip Code P. O. BOX 5001 Carol Stream, IL 60197-5001				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign telephone		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 08/03/2012	Payee name Austin AFL-CIO Council				
Amount (\$) \$215.00	Payee address City; State; Zip Code 2520 Longview St. Suite 211 Austin, TX 78705				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Labor day ad		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense	Gifts/Awards/Memorial 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 PAGE # Schedule: 2/10 Report: 22/31	2 FILER NAME Huber, Karen L. (Mrs.)	3 ACCOUNT # (TEC filers) 00232323
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4 Date 07/02/2012	5 Payee name Bank of America
6 Amount (\$) \$29.45	7 Payee address City; State; Zip Code P. O. BOX 2485 Spokane, WA 99210-2485

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit Card Merchant Account Fees
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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 08/02/2012	Payee name Bank of America
Amount (\$) \$26.97	Payee address City; State; Zip Code P. O. BOX 2485 Spokane, WA 99210-2485

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit card merchant account fees
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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 09/04/2012	Payee name Bank of America
Amount (\$) \$132.40	Payee address City; State; Zip Code P. O. BOX 2485 Spokane, WA 99210-2485

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit card merchant account fees
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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 09/07/2012	Payee name Brown, Garry (Mr.)
Amount (\$) \$140.00	Payee address City; State; Zip Code 1824 So. I.H. 35 # 358 Austin, TX 78704

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign services
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES	SCHEDULE F
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EXPENDITURE CATEGORIES			
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense	Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense	Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)
The INSTRUCTION GUIDE explains how to complete this form.			

1 PAGE # Schedule: 3/10 Report: 23/31	2 FILER NAME Huber, Karen L. (Mrs.)	3 ACCOUNT # (TEC filers) 00232323
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4 Date 09/27/2012	5 Payee name Brown, Garry (Mr.)
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6 Amount (\$) \$390.00	7 Payee address City; State; Zip Code 1824 So. I.H. 35 # 358 Austin, TX 78704
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign services
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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 07/23/2012	Payee name Butts, David (Mr.)
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Amount (\$) \$800.00	Payee address City; State; Zip Code 1914 Patton Lane Austin, TX 78723
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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) <input type="checkbox"/> Campaign services
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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 08/20/2012	Payee name Butts, David (Mr.)
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Amount (\$) \$800.00	Payee address City; State; Zip Code 1914 Patton Lane Austin, TX 78723
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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) <input type="checkbox"/> Campaign services
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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 09/18/2012	Payee name Butts, David (Mr.)
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Amount (\$) \$800.00	Payee address City; State; Zip Code 1914 Patton Lane Austin, TX 78723
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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) <input type="checkbox"/> Campaign research & services
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 4/10 Report: 24/31	2 FILER NAME Huber, Karen L. (Mrs.)	3 ACCOUNT # (TEC filers) 00232323
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4 Date 07/19/2012	5 Payee name Camarillo, Sylvia (Ms.)
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6 Amount (\$) \$1,750.00	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) Consulting Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign services
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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 08/06/2012	Payee name Camarillo, Sylvia (Ms.)
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Amount (\$) \$1,750.00	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) Consulting Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign services
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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 08/30/2012	Payee name Camarillo, Sylvia (Ms.)
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Amount (\$) \$3,500.00	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) Consulting Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign services
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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 08/24/2012	Payee name Checkmark Typesetting
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Amount (\$) \$8,736.77	Payee address City; State; Zip Code 3217 No. I. H. 35 Austin, TX 78722
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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) <input type="checkbox"/> Signs, etc.
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gifts/Awards/Memorial 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 PAGE # Schedule: 5/10 Report: 25/31 **2** FILER NAME Huber, Karen L. (Mrs.) **3** ACCOUNT # (TEC filers) 00232323

4 Date 09/18/2012 **5** Payee name Clark-Madison, Mike (Mr.)

6 Amount (\$) \$500.00 **7** Payee address City; State; Zip Code 1105 N. Lamar Blvd. Austin, TX 78703

8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description (If travel outside of Texas, complete Schedule T) Campaign public relations

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

Date 08/08/2012 Payee name Constant Contact

Amount (\$) \$58.19 Payee address City; State; Zip Code 1601 Trapelo Rd. #329 Waltham, MA 02451

PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense Description (If travel outside of Texas, complete Schedule T) email services

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

Date 09/08/2012 Payee name Constant Contact

Amount (\$) \$58.19 Payee address City; State; Zip Code 1601 Trapelo Rd. #329 Waltham, MA 02451

PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense Description (If travel outside of Texas, complete Schedule T) email services

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

Date 08/30/2012 Payee name Deshotel, Joe

Amount (\$) \$350.00 Payee address City; State; Zip Code Austin, TX

PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Description (If travel outside of Texas, complete Schedule T) Campaign services

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

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense	Gifts/Awards/Memorial 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 PAGE # Schedule: 6/10 Report: 26/31	2 FILER NAME Huber, Karen L. (Mrs.)	3 ACCOUNT # (TEC filers) 00232323
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4 Date 07/09/2012	5 Payee name Gilbert, Karen (Ms.)
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6 Amount (\$) \$2,500.00	7 Payee address City; State; Zip Code 103 B Franklin Blvd. Austin, TX 78751
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Consulting Services
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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 07/27/2012	Payee name Gilbert, Karen (Ms.)
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Amount (\$) \$2,500.00	Payee address City; State; Zip Code 103 B Franklin Blvd. Austin, TX 78751
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign consulting services
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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 08/30/2012	Payee name Gilbert, Karen (Ms.)
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Amount (\$) \$1,000.00	Payee address City; State; Zip Code 103 B Franklin Blvd. Austin, TX 78751
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign consulting services
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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 08/30/2012	Payee name Goss, Delwin (Mr.)
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Amount (\$) \$6,750.00	Payee address City; State; Zip Code 6410 Ponca St. Austin, TX 78741
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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) <input type="checkbox"/> Highway signs placements
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 7/10 Report: 27/31		2 FILER NAME Huber, Karen L. (Mrs.)		3 ACCOUNT # (TEC filers) 00232323	
4 Date 08/30/2012	5 Payee name Kelly Graphics				
6 Amount (\$) \$1,939.65	7 Payee address City; State; Zip Code 1409 Quaker Ridge Austin, TX 78746				
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) <input type="checkbox"/> Door hangers		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 08/30/2012	Payee name Littlefield, Mark (Mr.)				
Amount (\$) \$1,925.00	Payee address City; State; Zip Code P. O. Box 90591 Austin, TX 78709				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign research		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 09/19/2012	Payee name Neely, Mary Ann (Ms.)				
Amount (\$) \$350.00	Payee address City; State; Zip Code 1908 Barton Parkway Austin, TX 78704				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign services		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 09/07/2012	Payee name Office Max				
Amount (\$) \$198.07	Payee address City; State; Zip Code 4615 No. Lamar Austin, TX 78756				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Laser printer & supplies		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 8/10 Report: 28/31		2 FILER NAME Huber, Karen L. (Mrs.)		3 ACCOUNT # (TEC filers) 00232323	
4 Date 09/19/2012	5 Payee name Office Max				
6 Amount (\$) \$97.38	7 Payee address City; State; Zip Code 4615 No. Lamar Austin, TX 78756				
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) <input type="checkbox"/> Printing supplies		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 09/13/2012	Payee name Pay Pal, Inc				
Amount (\$) \$0.79	Payee address City; State; Zip Code 2211 N. 1st St. San Jose, CA 95131				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit card merchant account fees		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 07/27/2012	Payee name Texas AFL-CIO				
Amount (\$) \$100.00	Payee address City; State; Zip Code 1106 Lavaca St. # 200 Austin, TX 78701				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Staff parking		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 08/24/2012	Payee name ThinkStreet, Inc.				
Amount (\$) \$2,870.33	Payee address City; State; Zip Code 3601 S. Congress Building C, Suite 200 Austin, TX 78704				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign services		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 9/10 Report: 29/31

2 FILER NAME
Huber, Karen L. (Mrs.)

3 ACCOUNT # (TEC filers)
00232323

4 Date
09/04/2012

5 Payee name
ThinkStreet, Inc.

6 Amount (\$)
\$5,385.00

7 Payee address City; State; Zip Code
3601 S. Congress
Building C, Suite 200
Austin, TX 78704

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)
September Community Impact

9 Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name

Office sought:

Office held:

Date
09/19/2012

Payee name
ThinkStreet, Inc.

Amount (\$)
\$40,000.00

Payee address City; State; Zip Code
3601 S. Congress
Building C, Suite 200
Austin, TX 78704

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule)
Advertising Expense

Description (If travel outside of Texas, complete Schedule T)
Media buy

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name

Office sought:

Office held:

Date
08/24/2012

Payee name
Travis County Democratic Party

Amount (\$)
\$1,250.00

Payee address City; State; Zip Code
P. O. Box 684263
Austin, TX 78768-4263

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule)
Salaries/Wages/Contract Labor

Description (If travel outside of Texas, complete Schedule T)
Campaign services

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name

Office sought:

Office held:

Date
08/30/2012

Payee name
Travis County Democratic Party

Amount (\$)
\$2,250.00

Payee address City; State; Zip Code
P. O. Box 684263
Austin, TX 78768-4263

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule)
Salaries/Wages/Contract Labor

Description (If travel outside of Texas, complete Schedule T)
Campaign services

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name

Office sought:

Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 10/10 Report: 30/31		2 FILER NAME Huber, Karen L. (Mrs.)		3 ACCOUNT # (TEC filers) 00232323	
4 Date 09/19/2012		5 Payee name Travis County Democratic Party			
6 Amount (\$) \$2,900.00		7 Payee address City; State; Zip Code P. O. Box 684263 Austin, TX 78768-4263			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign field services	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 07/14/2012		Payee name U.S.Postal Service			
Amount (\$) \$180.00		Payee address City; State; Zip Code 7700 Northcross Dr. Austin, TX 78757			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/04/2012		Payee name U.S.Postal Service			
Amount (\$) \$90.00		Payee address City; State; Zip Code 7700 Northcross Dr. Austin, TX 78757			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/19/2012		Payee name U.S.Postal Service			
Amount (\$) \$135.00		Payee address City; State; Zip Code Downtown Station Austin, TX 78701			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

INTEREST EARNED, OTHER CREDITS/GAINS/ REFUNDS, AND PURCHASE OF INVESTMENTS

SCHEDULE K

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/1 Report: 31/31
2 FILER NAME Huber, Karen L. (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00232323
4 Date 09/17/2012	5 Name of person from whom amount is received Godaddy.com 6 Address of person from whom amount is received; City; State; Zip Code 14455 N. Hayden Rd., #219 Scottsdale, AZ 85260	8 Amount (\$) \$14.98
7 Purpose for which amount is received In-Store credit for intermittent service outages on September 10, 2012		