

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

8014

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 15
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; P. O. Box 302495 Austin, TX 78703	APT / SUITE #;	CITY; STATE; ZIP CODE
	Date Received 2013 JAN 14 PM 2:30 Dana DeBevoise County Clerk Travis County, Texas FILED FOR RECORD		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Joseph G.	MI
	NICKNAME Gary	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		
	Date Hand-delivered or Date Postmarked		
7 CAMPAIGN TREASURER PHONE	AREA CODE (512)	PHONE NUMBER 327-2403	EXTENSION
	Receipt #		
8 REPORT TYPE	Date Processed		
	Date Imaged		
9 PERIOD COVERED	Month Day Year 10/28/2012	THROUGH	Month Day Year 12/31/2012
	Date Received		
10 ELECTION	ELECTION DATE Month Day Year 11/06/2012	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
	Date Hand-delivered or Date Postmarked		
11 OFFICE	OFFICE HELD (if any) Travis Co. Commissioner Pct. 3	12 OFFICE SOUGHT (if known)	

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

15 NOTICE FROM POLITICAL COMMITTEE(S)

.. 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. ..

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

additional pages

16 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	434.00
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2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	18,384.00
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EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	132.45
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4. TOTAL POLITICAL EXPENDITURES	\$	22,240.12
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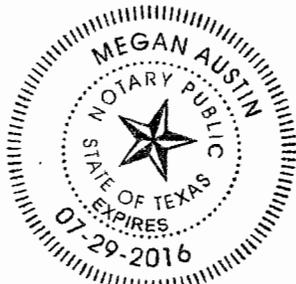
CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	13,965.74
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OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00
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17 AFFIDAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

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.

Karen L. Huber

 Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Karen L. Huber, this the 9th day of January, 2013, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Print name of officer administering oath

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: 2/5 Report: 4/15	
2 FILER NAME Huber, Karen L. (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00232323	
4 Date 10/30/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cornelius, Tom (Mr.) 6 Contributor address; City; State; Zip Code 203 Lacey Ave. Austin, TX 78746	7 Amount of contribution (\$) \$150.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 11/05/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Curren, Jeff (Mr.) 6 Contributor address; City; State; Zip Code 148 Landons Way Georgetown, TX 78633	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 11/05/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dunn, David (Mr.) 6 Contributor address; City; State; Zip Code 10421 Steamboat Dr. Austin, TX 78749	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 10/30/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Half Associates - State PAC 6 Contributor address; City; State; Zip Code 1201 No. Bowser Rd. Richardson, TX 75081	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 11/04/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hampton, Susan (Ms.) 6 Contributor address; City; State; Zip Code 4422 Eagles Landing Dr. Austin, TX 78735	7 Amount of contribution (\$) \$200.00	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: 4/5 Report: 6/15	
2 FILER NAME Huber, Karen L. (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00232323	
4 Date 11/05/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McColloch, Craig (Mr.) 6 Contributor address; City; State; Zip Code 3965 Sendero Dr. Austin, TX 78735	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 10/28/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mok, Amy (Ms.) Contributor address; City; State; Zip Code 6301 Cat Mountain Cove Austin, TX 78731	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/31/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Network of Asian American Organizations PAC Contributor address; City; State; Zip Code 8310-1 N Capital of Texas Hwy. Suite 305 Austin, TX 78731	Amount of contribution (\$) \$3,500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/31/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Raun, Laura (Ms.) Contributor address; City; State; Zip Code 206 Fletcher St. Austin, TX 78704	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) Laura
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/31/2012	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)
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: 5/5 Report: 7/15	
2 FILER NAME Huber, Karen L. (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00232323	
4 Date 11/05/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shockley, Cory (Mr.) 6 Contributor address; City; State; Zip Code 212 Choke Canyon Lane Georgetown, TX 78638	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 11/27/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Southwest Laborers District Council PAC Contributor address; City; State; Zip Code 11720 E 21st St. Ste. D Tulsa, OK 74129	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/30/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Watson, John (Mr.) Contributor address; City; State; Zip Code 1404 Pedernales Hills Rd. Johnson City, TX 78636	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		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: 1/8 Report: 8/15		2 FILER NAME Huber, Karen L. (Mrs.)		3 ACCOUNT # (TEC filers) 00232323	
4 Date 11/05/2012	5 Payee name American Express				
6 Amount (\$) \$88.79	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 12/05/2012	Payee name American Express				
Amount (\$) \$13.76	Payee address City; State; Zip Code P.O. Box 53852 Phoenix, AZ 85072-3852				
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 11/01/2012	Payee name Bank of America				
Amount (\$) \$493.57	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		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 12/03/2012	Payee name Bank of America				
Amount (\$) \$65.61	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		
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: 2/8 Report: 9/15	2 FILER NAME Huber, Karen L. (Mrs.)	3 ACCOUNT # (TEC filers) 00232323
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4 Date 11/26/2012	5 Payee name Brown, Garry (Mr.)
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6 Amount (\$) \$450.00	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 12/13/2012	Payee name Brown, Garry (Mr.)
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Amount (\$) \$1,000.00	Payee address City; State; Zip Code 1824 So. I.H. 35 # 358 Austin, TX 78704
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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"/> Salary supplement
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/31/2012	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 servicew
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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 11/08/2012	Payee name Butts, David (Mr.)
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Amount (\$) \$200.00	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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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: 3/8 Report: 10/15	2 FILER NAME Huber, Karen L. (Mrs.)	3 ACCOUNT # (TEC filers) 00232323
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4 Date 10/31/2012	5 Payee name Camarillo, Sylvia (Ms.)
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6 Amount (\$) \$816.00	7 Payee address City; State; Zip Code P O Box 9632 Austin, TX 78766
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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 10/31/2012	Payee name Camarillo, Sylvia (Ms.)
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Amount (\$) \$1,750.00	Payee address City; State; Zip Code P O Box 9632 Austin, TX 78766
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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 11/26/2012	Payee name Camarillo, Sylvia (Ms.)
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Amount (\$) \$500.00	Payee address City; State; Zip Code P O Box 9632 Austin, TX 78766
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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 10/31/2012	Payee name Checkmark Typesetting
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Amount (\$) \$201.45	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"/> Campaign materials
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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: 4/8 Report: 11/15		2 FILER NAME Huber, Karen L. (Mrs.)		3 ACCOUNT # (TEC filers) 00232323	
4 Date 10/31/2012		5 Payee name Clark-Madison, Mike (Mr.)			
6 Amount (\$) \$750.00		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) <input type="checkbox"/> Public relations	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/08/2012		Payee name Constant Contact			
Amount (\$) \$58.19		Payee address City; State; Zip Code 1601 Trapelo Rd. #329 Waltham, MA 02451			
8 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"/> Email services	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/08/2012		Payee name Constant Contact			
Amount (\$) \$58.19		Payee address City; State; Zip Code 1601 Trapelo Rd. #329 Waltham, MA 02451			
8 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"/> Email services	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/31/2012		Payee name Deshotel, Joe (Mr.)			
Amount (\$) \$290.00		Payee address City; State; Zip Code 501 E. Stassney # 1726 Austin, TX 78745			
8 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"/> Facebook	
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: 5/8 Report: 12/15		2 FILER NAME Huber, Karen L. (Mrs.)		3 ACCOUNT # (TEC filers) 00232323	
4 Date 10/31/2012	5 Payee name Deshotel, Joe (Mr.)				
6 Amount (\$) \$500.00	7 Payee address City; State; Zip Code 501 E. Stassney # 1726 Austin, TX 78745				
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) <input type="checkbox"/> Media ads		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 11/18/2012	Payee name Deshotel, Joe (Mr.)				
Amount (\$) \$250.00	Payee address City; State; Zip Code 501 E. Stassney # 1726 Austin, TX 78745				
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"/> Campaign media services		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 11/07/2012	Payee name Driskill Hotel				
Amount (\$) \$606.28	Payee address City; State; Zip Code 604 Brazos St. Austin, TX 78701				
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 election night headquarters		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 10/31/2012	Payee name Gilbert, Karen (Ms.)				
Amount (\$) \$1,000.00	Payee address City; State; Zip Code 103 B Franklin Blvd. Austin, TX 78751				
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"/> Consulting		
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: 6/8 Report: 13/15	2 FILER NAME Huber, Karen L. (Mrs.)	3 ACCOUNT # (TEC filers) 00232323
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4 Date 10/31/2012	5 Payee name Goss, Delwin (Mr.)
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6 Amount (\$) \$675.00	7 Payee address City; State; Zip Code 6410 Ponca St. Austin, TX 78741
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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) <input type="checkbox"/> Highway signs placement
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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 10/31/2012	Payee name Neely, Mary Ann (Ms.)
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Amount (\$) \$350.00	Payee address City; State; Zip Code 1908 Barton Parkway Austin, TX 78704
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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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Date 11/03/2012	Payee name Pok E Jos Smokehouse
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Amount (\$) \$276.82	Payee address City; State; Zip Code 1000 E. 41st St. Austin, TX 78751
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> TCD Hq. campaign volunteers
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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 11/15/2012	Payee name ThinkStreet, Inc.
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Amount (\$) \$372.50	Payee address City; State; Zip Code 3601 S. Congress Building C, 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) <input type="checkbox"/> Media production expenses
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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: 7/8 Report: 14/15		2 FILER NAME Huber, Karen L. (Mrs.)		3 ACCOUNT # (TEC filers) 00232323	
4 Date 11/15/2012		5 Payee name ThinkStreet, Inc.			
6 Amount (\$) \$6,443.27		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) <input type="checkbox"/> Media production expenses	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/16/2012		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) <input type="checkbox"/> Campaign field services	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/16/2012		Payee name Travis County Democratic Party			
Amount (\$) \$999.00		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) <input type="checkbox"/> Campaign field services	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/13/2012		Payee name Wheeler, Julie (Ms.)			
Amount (\$) \$300.00		Payee address City; State; Zip Code 4159 Steck Ave. #243 Austin, TX 78759			
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"/> Salary supplement	
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: 8/8 Report: 15/15		2 FILER NAME Huber, Karen L. (Mrs.)		3 ACCOUNT # (TEC filers) 00232323	
4 Date 11/19/2012		5 Payee name Worley Printing			
6 Amount (\$) \$549.24		7 Payee address City; State; Zip Code 3217 No. IH 35 Austin, TX 78722			
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"/> Campaign materials	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	