

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

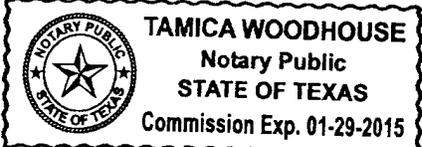
**FORM C/OH
COVER SHEET PG 2**

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

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 60.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 55,465.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 58.95
	4. TOTAL POLITICAL EXPENDITURES	\$ 3,300.99
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 52,222.96
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

18 AFFIDAVIT



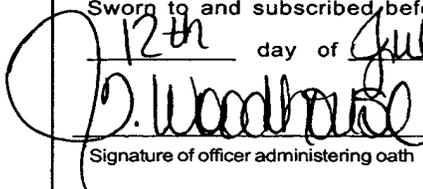
AFFIX NOTARY STAMP / SEAL ABOVE

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.



 Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Randall Slagle, this the 12th day of July, 20 13, to certify which, witness my hand and seal of office.



 Signature of officer administering oath

Tamica Woodhouse

 Printed name of officer administering oath

Tax Spec. II

 Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME Randall W. Slagle, Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 1/17/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matthew Shrum	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 808 West Ave Suite A Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 1/17/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hines, Ranc & Holub	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1307 Nueces St. Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 1/17/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charles Roadman	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1307 Nueces St. Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 1/17/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rene Vargas	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1106 San Antonio Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 1/17/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charles Popper	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 6409 Gouldville Ct. Austin, TX 78739		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A:	
2 FILER NAME Randall W. Slagle, Jr.			3 ACCOUNT # (Ethics Commission Filers)	
4 Date 1/17/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ben Blackburn	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)	
6 Contributor address; City; State; Zip Code 1106 San Antonio Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)		
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)		
Date 1/18/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Betty Blackwell	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 1306 Nueces St. Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 1/18/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brian Roark	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 1307 West Avenue Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 1/18/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patricia Cummings	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 405 Round Rock Ave. Round Rock, Texas 78664		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 1/18/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flores and Lopez	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 1200 Nueces St Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME Randall W. Slagle, Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 1/18/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eric Harron	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 600 W. 13th St. Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 1/18/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chris Sullivan	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 600 W. 13th St. Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 1/18/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corby Holcomb	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 199 Wild Plum Way. Austin, Texas 78737		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 1/19/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Chambers	Amount of contribution (\$) \$1,500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1104 Nueces St. Ste 208 Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 1/19/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeff Senter	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 700 Lavaca Ste 1400 Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME Randall W. Slagle, Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 1/19/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mike Luna	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 8617 Minot Circle Austin, Texas 78748		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 1/22/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenneth Gibson	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 700 Lavaca St Ste 1010 Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 1/22/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul Labuda	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2000 Delvin Lane Austin, Texas 78726		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 1/23/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ben Blackburn	Amount of contribution (\$) \$400.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1106 San Antonio Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 1/23/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott Smith	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 702 Rio Grande. Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME Randall W. Slagle, Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 1/25/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Frank	7 Amount of contribution (\$) \$550.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 1212 Guadalupe St. Suite 103, Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 1/25/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chris Gunter	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 600 W. 9th St. Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 1/25/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David A Sheppard	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1304 Nueces St. Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 1/26/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Mark Westenhover	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 404 W. 13th St. Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 1/26/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas Swain	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4209 Speedway Apt 106, Austin, TX 78751		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME Randall W. Slagle, Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 1/26/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) E.G. Morris	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 608 W. 12th St., Suite B. Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 1/29/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briggle & Polan, PLLC	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 812 San Antonio St. Suite 310 Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 1/29/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jana Ortega	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1106 Rio Grande St. Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 1/29/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Willam B. Mange	Amount of contribution (\$) \$125.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 600 W. 13th St Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 1/30/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez & Urrutia	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 801 W. Oltorf St Austin, Texas 78704		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME Randall W. Slagle, Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 1/30/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Granger and Mueller	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 605 W. 10th St. Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 1/30/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steve Turro	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 404 W. 13th St. Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 1/31/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ian Inglis	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 800 W. 5th St Unit 805 Austin, Texas 78703		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 2/1/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Florencia Rueda	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1301 Nueces St, Suite 101 Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 2/1/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Randy Langford	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1314 Rosewood Ave Apt 204 Austin, Texas 78702		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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2 FILER NAME Randall W. Slagle, Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 2/1/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul Batrice	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 1114 Lost Creek Blvd Suite 440 Austin, Texas 78746		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 2/2/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ricardo Maldonado	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 812 San Antonio St. Suite 118 Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 2/5/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dax Garvin	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 8732 Wood Stork Dr, Austin, TX 78729		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 2/5/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charles Grigson	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 604 W. 12th St Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 2/5/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Viktor Olavson	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 804 Rio Grande Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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2 FILER NAME Randall W. Slagle, Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 2/5/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sandra Ritz 6 Contributor address; City; State; Zip Code 902 Rio Grande St Austin, Texas 78701	7 Amount of contribution (\$) \$1,000.00 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 2/7/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Todd Dudley Contributor address; City; State; Zip Code 371 Fairfield Dr Kyle, Texas 78640	Amount of contribution (\$) \$250.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 2/8/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James Gill Contributor address; City; State; Zip Code 1201 Rio Grande Suite 200 Austin, Texas 78701	Amount of contribution (\$) \$250.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 2/8/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elisa Schell Lee Contributor address; City; State; Zip Code 5502 Blueridge Ct. Austin, Texas 78731	Amount of contribution (\$) \$500.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 2/8/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert Icenhauer-Ramirez Contributor address; City; State; Zip Code 1103 Nueces St Austin, Texas 78701	Amount of contribution (\$) \$500.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME Randall W. Slagle, Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 2/8/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) George Lobb	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code P.O. Box 26433 Austin, Texas 78755		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 2/8/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruce Fox	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 404 W. 13th St Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 2/9/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mark Sampson	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1045 Elliott Ranch Rd., Buda, TX 78610		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 2/9/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Louis Leichter	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1602 E. 7th St Austin, Texas 78702		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 2/11/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerald Smith	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 611 W. 14th St Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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SCHEDULE A

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2 FILER NAME Randall W. Slagle, Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 2/12/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nicole True	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 1524 S IH 35 Ste 232 Austin, Texas 78704		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 2/12/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul Quinzi	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 707 W 10th St Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 2/12/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeff McCrary	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2600 Lake Austin Blvd. #1214 Austin, Texas 78703		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 2/12/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jamie Spencer	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 812 San Antonio St. Suite 403 Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 2/13/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Virginia Greenway	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 811 Nueces St Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A:	
2 FILER NAME Randall W. Slagle, Jr.			3 ACCOUNT # (Ethics Commission Filers)	
4 Date 2/14/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Randy Leavitt	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)	
6 Contributor address; City; State; Zip Code 1301 Rio Grande St Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)		
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)		
Date 2/14/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duke Hildreth	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 806 W. 11th St. Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 2/16/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russ Sablatura	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 108 East Bagdad Avenue, Suite 200 Round Rock, Texas 78664		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 2/19/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul Labuda	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 2000 Delvin Lane Austin, Texas 78726		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 2/20/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tillman & Braniff	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 1405 Rio Grande, Austin, TX 78701		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME Randall W. Slagle, Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 2/23/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Christopher Perri	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 7903 Swindon Ln. Austin, Texas 78745		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 2/26/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) David White	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1205 Rio Grande St. Austin, Texas. 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 2/27/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dan Dworin	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 700 Lavaca Ste. 1550 Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 2/27/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) James Short	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4606 S. 2nd St. Austin, Texas 78745		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/1/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fernando Martinez	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1604 San Antonio St. Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME Randall W. Slagle, Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 3/2/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lucio Del Toro	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 2514 E. Cesar Chavez St. Austin, Texas 78702		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 3/3/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wade Russell	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 404 W 13th St. Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/9/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James Sustaita	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1301 Nueces St. Suite 200 Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/9/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ricardo Rodriguez	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1301 Nueces St. Suite 200 Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/11/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Margaret Kercher	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1301 Nueces St. Suite 101 Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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SCHEDULE A

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2 FILER NAME Randall W. Slagle, Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 3/12/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMinn Law Firm	7 Amount of contribution (\$) \$750.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 502 W. 14th St. Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 3/12/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joshua Saegert	Amount of contribution (\$) \$125.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 8156 Ceberry Austin, Texas 78759		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/13/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jason Trumpler	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 512 E. 11th St. Suite 110 Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/17/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charles Fagerberg	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 907 Rio Grande St. Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/17/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Grassbaugh	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 316 W. 12th St. Ste. 107 Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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SCHEDULE A

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2 FILER NAME Randall W. Slagle, Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 3/19/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul Labuda	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 2000 Devlin Ln. Austin, Texas 78728		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 3/21/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephen Orr	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 804 Rio Grande St. Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/23/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Ramos	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1016 Avondale Rd., Austin, TX 78704		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/23/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kyle Lowe	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 6801 Cypress Pt. Cove, Austin, TX 78746		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/28/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sumpter & Gonzalez	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 206 E. 9th St., Ste 1511 Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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SCHEDULE A

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2 FILER NAME Randall W. Slagle, Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 3/29/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Robb Shepherd	7 Amount of contribution (\$) \$125.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code P.O. Box 2526 Austin, TX 78768		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 3/30/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Erik Goodman	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1012 Rio Grande, Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/3/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) James Burke	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 18410 FM 969 Manor, TX 78653		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/4/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mary Ann Espiritu	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 710 Colorado St. #F10, Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/4/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sidney Williams	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 7901 Cameron Rd Ste 2-355, Austin TX 78754		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME Randall W. Slagle, Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/5/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andy Casey	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 8532 Woodstone Dr, Austin TX 78757		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/5/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sara Casey	Amount of contribution (\$) \$5.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 8532 Woodstone Dr, Austin TX 78757		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/6/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jack Bacon	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3839 Bee Caves Rd Ste 100, Austin TX 78746		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/9/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gus Garcia Jr.	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1012 Rio Grande Austin TX 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/9/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richard Segura	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 707 W 14th St Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME Randall W. Slagle, Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/10/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bristol Myers	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 5241 Austral Loop. Austin, TX 78739		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/10/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baird Farrelly	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2312 Western Trails Blvd. Ste 102A. Austin, TX 78745		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/11/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Will Anderson	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2108B Matthews Dr, Austin TX 78703		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/12/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cliff Swayze	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 512 E 11th St Ste 202, Austin TX 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/13/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrett Hansen	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P.O Box 429 Cedar Creek TX 78612		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME Randall W. Slagle, Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/16/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James Parker	7 Amount of contribution (\$) \$1,000.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 1803 Chimney Rock, Orange TX 77630		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/16/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jesus Tirrez	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4801 Crafty Cove, Austin, TX 78749		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/19/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mark McCrimmon	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 704 W. 9th St., Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/23/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adam Loewy	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 111 Congress Avenue, Suite 400, Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/23/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott Spears	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 901 Mopac Expwy South, Bldg 1 Suite 420, Austin, Texas 78746		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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SCHEDULE A

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2 FILER NAME Randall W. Slagle, Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/24/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chris Dorbandt	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 603 W. 12th St. Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/24/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Betty Blackwell	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1306 Nueces St. Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/25/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albert Machado	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 607 W. 9th St., Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/26/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keith Taniguchi	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2808 Wooldridge Dr. Austin, TX 78703		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/26/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olivia Mayberry	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 11105 Township Cove, Austin, TX 78759		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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2 FILER NAME Randall W. Slagle, Jr.			3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/26/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Mark Westenhover	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)	
6 Contributor address; City; State; Zip Code 404 W. 13th St., Austin, TX 78701		(If travel outside of Texas, complete Schedule T)		
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)	
Date 4/26/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raleigh Van Trease	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code P. O. Box 341045, Austin, TX 78734		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date 4/27/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steven C. Lee	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 603 W. 17th St., Austin, TX 78701		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date 4/30/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buford & Gonzalez	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 603 W. 17th St., Austin, TX 78701		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date 5/1/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Todd Dudley	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 371 Fairfield Dr Kyle, Texas 78640		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	

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2 FILER NAME Randall W. Slagle, Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/2/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunham & Jones 6 Contributor address; City; State; Zip Code P.O. Box 684666, Austin, TX 78768	7 Amount of contribution (\$) \$250.00 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 5/3/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thad Thomason Contributor address; City; State; Zip Code 10703 Plumewood, Austin, TX 78750	Amount of contribution (\$) \$250.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/4/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kiele Pace Contributor address; City; State; Zip Code 3306 Clarksburg Dr, Austin, TX 78745	Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/6/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul Morin Contributor address; City; State; Zip Code 503 W. 14th St., Austin, TX 78701	Amount of contribution (\$) \$250.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/7/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennie Ray Contributor address; City; State; Zip Code 710 W. 14th St. Suite C, Austin, TX 78701	Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A:	
2 FILER NAME Randall W. Slagle, Jr.			3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/7/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richard Gentry	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)	
6 Contributor address; City; State; Zip Code 812 San Antonio St. Ste. 100, Austin, TX 78701		(If travel outside of Texas, complete Schedule T)		
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)		
Date 5/7/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peek & Toland	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 1153 San Bernard, Austin, TX 78702		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 5/8/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert Littlefield	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 7705 Vail Valley Dr, Austin, TX 78749		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 5/10/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geoffrey Shreve	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 350 North Street Unit 1401, San Marcos, TX 78666		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 5/10/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jack Bacon	Amount of contribution (\$) \$75.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 3839 Bee Caves Rd., Ste. 100, AUSTIN, TX 78746		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		

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SCHEDULE A

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2 FILER NAME Randall W. Slagle, Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/10/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Wofford	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 1000 San Marcos St. Suite 317, Austin, TX 78702		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 5/10/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nancy Nicolas	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4604 Ramsey ave, Austin, TX 78756		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/10/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mindy Montford	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2407 Bowman, Austin, TX 78703		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/11/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emily Scholten	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 5411 McCandless St, Austin, TX 78756		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/11/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jim Wick	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2611 Ektom Drive, Unit D, Austin, TX 78745		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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2 FILER NAME Randall W. Slagle, Jr.			3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/11/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gabriella Young	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)	
6 Contributor address; City; State; Zip Code 818 west tenth , Austin, TX 78701		(If travel outside of Texas, complete Schedule T)		
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)	
Date 5/10/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greg Douglass	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 1211 Creekview Dr, Round Rock, TX 78681		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date 5/10/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Lipscombe	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 6600 Mesa Dr, Austin, TX 78731		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date 5/10/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuhn, Bhakta, Turner & Kuhn	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 603 West Eighth St, Austin, TX 78701		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date 5/10/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corby Holcomb	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 199 Wild Plum Way, Austin, TX 78737		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	

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2 FILER NAME Randall W. Slagle, Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/10/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Margaret Gomez	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code P.O. Box 3232, Austin, TX 78704		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 5/10/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elsie Craven	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1112 Cripple Creek Dr., Austin, TX 78758		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/2/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minton, Burton, Bassett & Collins	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1100 Guadalupe St., Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/7/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Courtney Miller	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4307 Avenue C, Austin, TX 78751		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/9/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robbin Kohn	Amount of contribution (\$) \$10.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1200 Barton Hills Dr. Apt 363, Austin, TX 78704		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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2 FILER NAME Randall W. Slagle, Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/10/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Smith	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code P.O. Box 537, Austin, TX 78767		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 5/10/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kathryn Slagle	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3701 Hawkshead Dr., Austin, TX 78727		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/10/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nancy Parker	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 12157 Windy Ridge Rd., Austin, TX 78726		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/10/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Courreges	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P.O. Box 92648, Austin, TX 78709		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/10/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matthew Jones	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 7802 Rutgers Ave., Austin, TX 78757		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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2 FILER NAME Randall W. Slagle, Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/10/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ken Craig	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 913 B Sirocco Dr., Austin, TX 78745		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 5/10/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Alberto Garcia	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1715 S. 1st St., Austin, TX 78704		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/10/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Victoria Ashley	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 5427 Austral Loop, Austin, TX 78739		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/10/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Xavier Montalvo	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 7501 Vol Walker Dr., Austin, TX 78749		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/10/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shanon Stanfield	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3433 W. Dallas St. Apt. 1123, Houston, TX 77019		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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2 FILER NAME Randall W. Slagle, Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/10/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kim Slagle	7 Amount of contribution (\$) \$1,000.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 12202 Rolston Place, Austin, TX 78726		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 5/10/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amber Vazquez Bode	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1004 West Ave, Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/10/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larry Sauer	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1004 West Ave, Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/10/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melissa De La Garza	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 9808 Briar Ridge Dr., Austin, TX 78748		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/10/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul Labuda	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2000 Delvin Ln., Austin, TX 78728		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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2 FILER NAME Randall W. Slagle, Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/8/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brad Urrutia	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 801 W. Oltorf St., Austin TX 78704		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 5/10/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) David Chambers	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1104 Nueces St, Ste 208, Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/10/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Eva Wisser	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 7882 Lakewood Dr., Austin, TX 78750		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/10/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chris Gunter	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 600 W. 9th St., Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/10/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Thomas Swain	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1301 Nueces St, Ste 101, Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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2 FILER NAME Randall W. Slagle, Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/10/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul Walcutt	7 Amount of contribution (\$) \$75.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 600 W. 13th St, Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 5/10/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mack Martinez	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3804 Bailey Ln. No 1, Austin, TX 78759		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/10/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rene Reyes	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1403 Garden St., Austin, TX 78702		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/10/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexandra Holmes	Amount of contribution (\$) \$40.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3905 Cologne Ln, Austin, TX 78727		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/10/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kris Davis-Jones	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4424 Gaines Ranch Loop #1035, Austin, TX 78735		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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2 FILER NAME Randall W. Slagle, Jr.			3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/10/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Antonio Wehnes	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)	
6 Contributor address; City; State; Zip Code 1602 E. 7th St, Austin, TX 78702		(If travel outside of Texas, complete Schedule T)		
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)	
Date 5/10/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kyle Lowe	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 800 Rio Grande St, Austin, TX 78701		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date 5/10/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Timmins	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 16008 Snowdonia Cove, Austin, TX 78738		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date 5/10/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Betty Blackwell	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 1306 Nueces St, Austin, TX 78701		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date 5/10/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Botsford	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 1307 West Ave, Austin, TX 78701		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	

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4 Date 5/10/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ben Blackburn	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 1106 San Antonio Austin, Texas 78701		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 5/10/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nancy Hohengarten	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4114 Avenue H, Austin, TX 78751		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/10/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oscar Buitron	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 505 W. 12th St., Ste. 204, Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/16/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilbert Martinez	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 5105 Suburban Drive, Austin, TX 78745		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/17/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nathaniel Williams	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1056 Hidden Hills Dr, Dripping Springs, TX 78620		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME Randall W. Slagle, Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/21/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul Labuda	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 2000 Delvin Ln, Austin, TX 78728		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 5/21/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dalton Wallace	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 9505 Johnny Morris Rd, Austin, TX 78724		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/21/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ian Inglis	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 800 W. 5th St. Unit 805, Austin, TX 78703		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/21/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scanlan, Buckle & Young	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 602 W. 11th St, Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/30/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richard Jung	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2704 Woodland Hills Cove, Austin, TX 78732		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME Randall W. Slagle, Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/31/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lusk & Evans	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 806 W. 11th St, Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 6/11/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Novert Morales	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1007 E. 7th St, Austin, TX 78702		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 6/14/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniel Hamre	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1121A Bluebonnet Lane, Austin TX 78704		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 6/19/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jody Sims	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 10617 North Platt River Drive, Austin, TX 78748		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 6/24/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Randy Langford	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1314 Rosewood Ave, Apt. 204, Austin, TX 78702		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME Randall W. Slagle, Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 6/24/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Judy Shipway	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 1008 Maufrais St., Austin, TX 78703		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 6/26/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul Labuda	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2000 Delvin Ln., Austin, TX 78728		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 6/26/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Natalie Fowler	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1002 Juniper St., Austin, TX 78702		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 6/26/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnny Urrutia	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 8904 Bill Hickcock Pass, Austin, TX 78748		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 6/26/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold Garcia	Amount of contribution (\$) \$600.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 504 W. 7 th St., Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME Randall W. Slagle, Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 6/27/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kevin Boyd	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 507 W. 10 th St, Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 6/27/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ben Blackburn	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1106 San Antonio St, Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 6/27/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robb Shepherd	Amount of contribution (\$) \$125.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P.O. Box 2526, Austin, TX 78768		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 6/28/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ariel Payan	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1102 Bluebonnet Ln., Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 6/28/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Billy McNabb	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 144 E. San Antonio St, San Marcos, TX 78666		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME Randall W. Slagle, Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 6/28/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allan Williams	7 Amount of contribution (\$) \$1500.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 2400 Camino Alto, Austin TX 78746		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 6/28/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon Rubinet	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3806 Hidden Hollow, Austin, TX 78731		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 6/28/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steve Brittain	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1100 West Ave, Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 6/28/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kimberly Williams	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 307 Bulian Ln., Austin, TX 78746		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 6/28/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert Carr	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4826 Hwy 71 E., Del Valle, TX 78617		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/7/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James Bourque	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 507 W. 10 th St., Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 5/9/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Garbe	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1211 Blair Way, Austin, TX 78704		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 6/29/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jesus Gabriel Hernandez	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 507 W. 10 th St., Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 6/30/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard Payne Jr.	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1427 Chase Oaks Dr., Keller, TX 76248		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 1 of 19	2 FILER NAME Randall W. Slagle, Jr.	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 03/20/13	5 Payee name University Democrats
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6 Amount (\$) \$50.00	7 Payee address; City; State; Zip Code SOC #145 100-C West Dean Keeton St., Austin, TX 78712
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contributions Made by Candidate	(b) Description (If travel outside of Texas, complete Schedule T) fundraiser sponsorship
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 03/29/13	Payee name Scholz Garten
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Amount (\$) \$378.88	Payee address; City; State; Zip Code 1607 San Jacinto Blvd., Austin, TX 78701
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) room rental
------------------------	---	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 04/22/13	Payee name Randalls
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Amount (\$) \$64.50	Payee address; City; State; Zip Code 8040 Mesa Dr, Austin, TX 78731
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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) stamps
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 04/26/13	Payee name Cinco De Mayo Committee
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Amount (\$) \$100.00	Payee address; City; State; Zip Code PO Box 1748, Austin, TX 78767
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contributions Made by Candidate	Description (If travel outside of Texas, complete Schedule T) event sponsorship
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 2 of 19	2 FILER NAME Randall W. Slagle, Jr.	3 ACCOUNT # (Ethics Commission Filers)
4 Date 04/26/13	5 Payee name Burnt Orange Report	
6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 2024 Simond Ave. Apt. B, Austin, TX 78723	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contributions Made by Candidate	(b) Description (If travel outside of Texas, complete Schedule T) fundraiser sponsorship
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 05/09/13	Payee name Scholz Garten	
Amount (\$) \$814.37	Payee address; City; State; Zip Code 1607 San Jacinto Blvd., Austin, TX 78701	
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) campaign event food and beverage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 05/11/13	Payee name Worley Printing	
Amount (\$) \$638.68	Payee address; City; State; Zip Code 3217 N Interstate 35 Frontage Rd, Austin, TX 78722	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) print material
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 05/15/13	Payee name Checkmark Typesetting	
Amount (\$) \$162.38	Payee address; City; State; Zip Code 3217 N Interstate 35 Frontage Rd, Austin, TX 78722	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) print design and material
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 3 of 19		2 FILER NAME Randall W. Slagle, Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 05/27/13		5 Payee name Walmart			
6 Amount (\$) \$46.10		7 Payee address; City; State; Zip Code 13201 Ranch Road 620 N, Austin, TX 78717			
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) stamps	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 01/17/13		Payee name Piryx, Inc.			
Amount (\$) \$2.25		Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 01/22/13		Payee name Piryx, Inc.			
Amount (\$) \$11.25		Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 01/24/13		Payee name Piryx, Inc.			
Amount (\$) \$24.75		Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 4 of 19	2 FILER NAME Randall W. Slagle, Jr.	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 01/25/13	5 Payee name Piryx, Inc.
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6 Amount (\$) \$11.25	7 Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee
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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 01/28/13	Payee name Piryx, Inc.
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Amount (\$) \$22.50	Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee
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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 01/29/13	Payee name Piryx, Inc.
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Amount (\$) \$6.75	Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee
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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 01/31/13	Payee name Piryx, Inc.
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Amount (\$) \$22.50	Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 5 of 19		2 FILER NAME Randall W. Slagle, Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 01/31/13		5 Payee name Piryx, Inc.			
6 Amount (\$) \$11.25		7 Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Accounting/Banking		(b) Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 02/04/13		Payee name Piryx, Inc.			
Amount (\$) \$11.25		Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 02/06/13		Payee name Piryx, Inc.			
Amount (\$) \$11.25		Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 02/07/13		Payee name Piryx, Inc.			
Amount (\$) \$11.25		Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 6 of 19	2 FILER NAME Randall W. Slagle, Jr.	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 02/08/13	5 Payee name Piryx, Inc.
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6 Amount (\$) \$11.25	7 Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee
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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 02/11/13	Payee name Piryx, Inc.
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Amount (\$) \$22.50	Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee
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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 02/11/13	Payee name Piryx, Inc.
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Amount (\$) \$22.50	Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee
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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 02/15/13	Payee name Piryx, Inc.
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Amount (\$) \$22.50	Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 7 of 19	2 FILER NAME Randall W. Slagle, Jr.	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 02/19/13	5 Payee name Piryx, Inc.
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6 Amount (\$) \$11.25	7 Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 02/22/13	Payee name Piryx, Inc.
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Amount (\$) \$4.50	Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 03/10/13	Payee name Piryx, Inc.
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Amount (\$) \$4.50	Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 03/11/13	Payee name Piryx, Inc.
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Amount (\$) \$33.75	Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 8 of 19	2 FILER NAME Randall W. Slagle, Jr.	3 ACCOUNT # (Ethics Commission Filers)
4 Date 03/12/13	5 Payee name Piryx, Inc.	
6 Amount (\$) \$11.25	7 Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 03/22/13	Payee name Piryx, Inc.	
Amount (\$) \$11.25	Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 03/22/13	Payee name Piryx, Inc.	
Amount (\$) \$11.25	Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 03/28/13	Payee name Piryx, Inc.	
Amount (\$) \$5.63	Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 9 of 19		2 FILER NAME Randall W. Slagle, Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 03/29/13		5 Payee name Piryx, Inc.			
6 Amount (\$) \$6.75		7 Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Accounting/Banking		(b) Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 04/03/13		Payee name Piryx, Inc.			
Amount (\$) \$11.25		Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 04/03/13		Payee name Piryx, Inc.			
Amount (\$) \$9.00		Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 04/04/13		Payee name Piryx, Inc.			
Amount (\$) \$11.25		Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 10 of 19	2 FILER NAME Randall W. Slagle, Jr.	3 ACCOUNT # (Ethics Commission Filers)
4 Date 04/04/13	5 Payee name Piryx, Inc.	
6 Amount (\$) \$0.23	7 Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 04/05/13	Payee name Piryx, Inc.	
Amount (\$) \$4.50	Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 04/09/13	Payee name Piryx, Inc.	
Amount (\$) \$11.25	Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 04/10/13	Payee name Piryx, Inc.	
Amount (\$) \$11.25	Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 11 of 19		2 FILER NAME Randall W. Slagle, Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 04/12/13		5 Payee name Piryx, Inc.			
6 Amount (\$) \$2.25		7 Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Accounting/Banking		(b) Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 04/15/13		Payee name Piryx, Inc.			
Amount (\$) \$45.00		Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 04/16/13		Payee name Piryx, Inc.			
Amount (\$) \$45.00		Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 04/22/13		Payee name Piryx, Inc.			
Amount (\$) \$22.50		Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 12 of 19		2 FILER NAME Randall W. Slagle, Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 04/23/13		5 Payee name Piryx, Inc.			
6 Amount (\$) \$22.50		7 Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Accounting/Banking		(b) Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 04/25/13		Payee name Piryx, Inc.			
Amount (\$) \$4.50		Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 04/25/13		Payee name Piryx, Inc.			
Amount (\$) \$4.50		Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 04/30/13		Payee name Piryx, Inc.			
Amount (\$) \$11.25		Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 13 of 19	2 FILER NAME Randall W. Slagle, Jr.	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 05/02/13	5 Payee name Piryx, Inc.
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6 Amount (\$) \$11.25	7 Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee
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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 05/03/13	Payee name Piryx, Inc.
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Amount (\$) \$4.50	Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee
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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 05/06/13	Payee name Piryx, Inc.
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Amount (\$) \$11.25	Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee
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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 05/06/13	Payee name Piryx, Inc.
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Amount (\$) \$22.50	Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 14 of 19	2 FILER NAME Randall W. Slagle, Jr.	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 05/07/13	5 Payee name Piryx, Inc.
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6 Amount (\$) \$2.25	7 Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee
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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 05/09/13	Payee name Piryx, Inc.
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Amount (\$) \$4.50	Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee
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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 05/09/13	Payee name Piryx, Inc.
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Amount (\$) \$3.38	Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee
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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 05/09/13	Payee name Piryx, Inc.
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Amount (\$) \$22.50	Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 15 of 19	2 FILER NAME Randall W. Slagle, Jr.	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 05/09/13	5 Payee name Piryx, Inc.
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6 Amount (\$) \$4.50	7 Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee
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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 05/09/13	Payee name Piryx, Inc.
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Amount (\$) \$4.50	Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee
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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 05/09/13	Payee name Piryx, Inc.
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Amount (\$) \$11.25	Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee
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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 05/09/13	Payee name Piryx, Inc.
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Amount (\$) \$2.25	Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 16 of 19		2 FILER NAME Randall W. Slagle, Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 05/10/13		5 Payee name Piryx, Inc.			
6 Amount (\$) \$2.25		7 Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Accounting/Banking		(b) Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 05/10/13		Payee name Piryx, Inc.			
Amount (\$) \$1.13		Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 05/10/13		Payee name Piryx, Inc.			
Amount (\$) \$2.25		Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 05/15/13		Payee name Piryx, Inc.			
Amount (\$) \$4.50		Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 17 of 19	2 FILER NAME Randall W. Slagle, Jr.	3 ACCOUNT # (Ethics Commission Filers)
4 Date 06/11/13	5 Payee name Piryx, Inc.	
6 Amount (\$) \$22.50	7 Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 06/19/13	Payee name Piryx, Inc.	
Amount (\$) \$13.50	Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 06/24/13	Payee name Piryx, Inc.	
Amount (\$) \$4.50	Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 06/24/13	Payee name Piryx, Inc.	
Amount (\$) \$4.50	Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 18 of 19	2 FILER NAME Randall W. Slagle, Jr.	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 06/26/13	5 Payee name Piryx, Inc.
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6 Amount (\$) \$4.50	7 Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 06/26/13	Payee name Piryx, Inc.
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Amount (\$) \$1.13	Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 06/26/13	Payee name Piryx, Inc.
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Amount (\$) \$11.25	Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 06/27/13	Payee name Piryx, Inc.
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Amount (\$) \$5.63	Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 19 of 19	2 FILER NAME Randall W. Slagle, Jr.	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 06/28/13	5 Payee name Piryx, Inc.
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6 Amount (\$) \$2.25	7 Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee
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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 06/30/13	Payee name Piryx, Inc.
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Amount (\$) \$11.25	Payee address; City; State; Zip Code 144 2nd St. 1st Floor, San Francisco, CA, 94105
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) credit card donation processing fee
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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	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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