

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

13 C/OH NAME Eckhardt, Sarah

14 ACCOUNT # (Ethics Commission filers)
00000003

15 NOTICE FROM POLITICAL COMMITTEE(S)

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED **\$ 3,449.35**

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) **\$ 26,229.35**

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED **\$ 240.68**

4. TOTAL POLITICAL EXPENDITURES **\$ 49,338.62**

CONTRIBUTION BALANCE

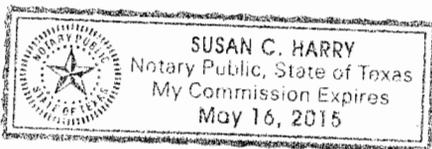
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD **\$ 76,034.96**

OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD **\$ 10,000.00**

17 AFFIDAVIT

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



Sarah Eckhardt
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Sarah Eckhardt, this the 3rd day of February, 2014, to certify which, witness my hand and seal of office.

Susan C. Harry
Signature of officer administering oath

Susan C. Harry
Print name of officer administering oath

Notary
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/15 Report: 4/32	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date 01/07/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bail Bonds Express 6 Contributor address; City; State; Zip Code 111 W 10th St Austin, TX 78701-2319	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 01/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Barnes, Phil Contributor address; City; State; Zip Code 309 Nixon Dr Austin, TX 78746-5567	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 01/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bell, Mary Contributor address; City; State; Zip Code 2203 Scenic Dr Austin, TX 78703-2056	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 01/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bright, Annie Contributor address; City; State; Zip Code 932 E 54th St Austin, TX 78751-1721	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 01/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Browne, Dorothy Contributor address; City; State; Zip Code 2107 W 11th St Austin, TX 78703-3801	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/15 Report: 5/32	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date 01/17/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Buendel, Christine 6 Contributor address; City; State; Zip Code 1200 Elm St Apt 211 Austin, TX 78703-4056	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 01/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Calvert, Sarah Contributor address; City; State; Zip Code 8702 El Rey Blvd Austin, TX 78737-1327	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 01/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cartwright, Mary Contributor address; City; State; Zip Code 1715 Norris Dr Austin, TX 78704-2807	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 01/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chatmon-Thomas, Socar Contributor address; City; State; Zip Code 106 E 6th St Ste 900 Austin, TX 78701-3665	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 01/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) CP&Y Inc. PAC Contributor address; City; State; Zip Code 1820 Regal Row Ste. 200 Dallas, TX 75235	Amount of contribution (\$) \$2,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/15 Report: 6/32	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date 01/14/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dailey, Robert 6 Contributor address; City; State; Zip Code PO Box 200068 Austin, TX 78720	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 01/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Davenport, Sally Contributor address; City; State; Zip Code 3721 Whitt Loop Austin, TX 78749-6941	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 01/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Davis, James Contributor address; City; State; Zip Code 410 Buckeye Trl West Lake Hills, TX 78746-4424	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 01/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) De La Rosa, Noralba Contributor address; City; State; Zip Code 5810 Republic Of Texas Blvd Austin, TX 78735-6317	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 01/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dorn, Edwin Contributor address; City; State; Zip Code PO Box Y Austin, TX 78713-8925	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/15 Report: 7/32	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date 01/23/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dukette, Scott 6 Contributor address; City; State; Zip Code 4410 Twisted Tree Dr Austin, TX 78735-6432	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 01/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dunkelberg, Anne Contributor address; City; State; Zip Code 2606 Little John Ln Austin, TX 78704	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 01/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dunnam & Associates, LLC Contributor address; City; State; Zip Code 7208 Squirrel Oak Cir Austin, TX 78749-2334	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 01/14/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ferguson, Frances Contributor address; City; State; Zip Code 1013 Harwood Pl Austin, TX 78704-2612	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 01/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fernandez, Frank Contributor address; City; State; Zip Code 4325 Scales St Austin, TX 78723	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) food/beverages for event (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/15 Report: 8/32	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date 01/19/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fernandez, Frank 6 Contributor address; City; State; Zip Code 4325 Scales St Austin, TX 78723	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 01/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Forbes, Tricia Contributor address; City; State; Zip Code 2601 Roxmoor Dr. Austin, TX 78703	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 01/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Griffith, Carl Contributor address; City; State; Zip Code 26985 Interstate 10 Winnie, TX 77665-8243	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 01/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hanson, Kathleen Contributor address; City; State; Zip Code 16400 Hamilton Pool Rd Austin, TX 78738-7300	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 01/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hartman, Elizabeth Contributor address; City; State; Zip Code 6206 Bon Terra Dr Austin, TX 78731-3840	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/15 Report: 9/32	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date 01/21/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Head, Bill 6 Contributor address; City; State; Zip Code 1104 Enfield Rd Austin, TX 78703-4128	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 01/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hegemier, Tom Contributor address; City; State; Zip Code 2522 Stagecoach Ranch Rd Dripping Springs, TX 78620-2310	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 01/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hon, Joe Contributor address; City; State; Zip Code PO Box 685092 Austin, TX 78768-5092	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 01/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Huffstutler, David Contributor address; City; State; Zip Code 3005 Bowman Ave Austin, TX 78703-2251	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 01/14/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ireson, Diane Contributor address; City; State; Zip Code 2900 Wade Ave Austin, TX 78703-1017	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/15 Report: 10/32	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date 01/23/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ireson, Diane 6 Contributor address; City; State; Zip Code 2900 Wade Ave Austin, TX 78703-1017	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 01/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jin, Jessica Contributor address; City; State; Zip Code 1109 S Pleasant Valley Rd Apt 623 Austin, TX 78741-1891	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 01/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) King, Sterling Contributor address; City; State; Zip Code 1808 Kerr Ave Austin, TX 78704-1429	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 01/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kraber, Jennifer Contributor address; City; State; Zip Code 4207 Greenridge Pl Austin, TX 78759-7313	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 01/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kraber, Karl Contributor address; City; State; Zip Code 3922 Balcones Dr Austin, TX 78731-5810	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 10/15 Report: 12/32	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date 01/09/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Long, Walter 6 Contributor address; City; State; Zip Code 211 W Live Oak St Austin, TX 78704-5114	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 01/07/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lorenz, Perry Contributor address; City; State; Zip Code 1311 E 6th St Ste A Austin, TX 78702	Amount of contribution (\$) \$2,500.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 01/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Marak-Walker, Helen Contributor address; City; State; Zip Code 4320 Scales St Austin, TX 78723-5396	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 01/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mauro, Cristina Contributor address; City; State; Zip Code 2208 Townes Ln Austin, TX 78703-2330	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 01/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Melrose, Mark Contributor address; City; State; Zip Code 277 W 10th St Apt 12C New York, NY 10014-2582	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 11/15 Report: 13/32	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date 01/23/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Miller, Hillary 6 Contributor address; City; State; Zip Code 6012 Marquesa Dr Austin, TX 78731-3818	7 Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 01/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mueller, Joan Contributor address; City; State; Zip Code 4200 Jackson Ave Apt 4013 Austin, TX 78731	Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 01/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Munguia, Rose-Michel Contributor address; City; State; Zip Code 1810 Ohlen Rd Austin, TX 78757-7810	Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 01/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Munguia, Rose-Michel Contributor address; City; State; Zip Code 1810 Ohlen Rd Austin, TX 78757-7810	Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 01/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ozgen, Ramazan Contributor address; City; State; Zip Code 2000 Short Summer Dr Austin, TX 78754-5857	Amount of contribution (\$) \$150.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 12/15 Report: 14/32	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date 01/21/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Parks, Carol 6 Contributor address; City; State; Zip Code 1913 McCloskey St Austin, TX 78723-5386	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 01/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Paup, Karen Contributor address; City; State; Zip Code 1726 E 38th St Austin, TX 78722-1202	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 01/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Peter A. Ravella Consulting, LLC Contributor address; City; State; Zip Code 4107 Wildwood Rd Austin, TX 78722-1121	Amount of contribution (\$) \$1,200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 01/04/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Polikov, Scott Contributor address; City; State; Zip Code 3000 Blackburn St Apt 401 Dallas, TX 75204	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 01/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pulaski, Jane Contributor address; City; State; Zip Code 1200 Elm St Apt 212 Austin, TX 78703	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 13/15 Report: 15/32	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date 01/18/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ramsey, Lesley 6 Contributor address; City; State; Zip Code 1420 Westmoor Dr Austin, TX 78723-3139	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable) food/beverage for event (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 01/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ramsey, Lesley Contributor address; City; State; Zip Code 1420 Westmoor Dr Austin, TX 78723-3139	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 01/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ravella, Peter Contributor address; City; State; Zip Code 4107 Wildwood Rd Austin, TX 78722	Amount of contribution (\$) \$605.00	In-kind contribution description (if applicable) food/beverages for event (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 01/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Seremetis, Laurie Contributor address; City; State; Zip Code 1016 Shelley Ave Austin, TX 78703-4839	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 01/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shishima, Gina Contributor address; City; State; Zip Code 3900 Avenue G Austin, TX 78751-4706	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 14/15 Report: 16/32	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date 01/20/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Glenn 6 Contributor address; City; State; Zip Code 1205 Kinney Ave Apt A Austin, TX 78704	7 Amount of contribution (\$) \$150.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 01/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Southwest Laborers District Council SWLDC PAC Contributor address; City; State; Zip Code 11720 E 21st St Suite D Tulsa, OK 74129	Amount of contribution (\$) \$2,500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 01/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stowell, Albert Contributor address; City; State; Zip Code 606 W 11th St Austin, TX 78701-2007	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 01/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Warneke, Bob Contributor address; City; State; Zip Code 310 Le Grande Ave Austin, TX 78704-1849	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 01/11/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Weaver, Catherine Contributor address; City; State; Zip Code 7002 Windrift Way Austin, TX 78745-5442	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 15/15 Report: 17/32	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date 01/23/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Weaver, Catherine 6 Contributor address; City; State; Zip Code 7002 Windrift Way Austin, TX 78745-5442	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 01/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Weinmann, Elizabeth Contributor address; City; State; Zip Code 312 Woodland St Houston, TX 77009-7245	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 01/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Westergren, Mike Contributor address; City; State; Zip Code 2033 18th St Corpus Christi, TX 78404-3802	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 01/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Yevich, Elizabeth Contributor address; City; State; Zip Code 2105 Ann Arbor Ave Unit B Austin, TX 78704-3917	Amount of contribution (\$) \$75.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 01/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Yost, Linda Contributor address; City; State; Zip Code 218 Fletcher St Austin, TX 78704-5129	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/15 Report: 18/32	2 FILER NAME Eckhardt, Sarah	3 ACCOUNT # (TEC filers) 00000003
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4 Date 01/03/2014	5 Payee name Adjavon, Tsoke
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6 Amount (\$) \$145.00	7 Payee address City; State; Zip Code 916 Rochester Castle Way Pflugerville, TX 78660
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor
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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 01/13/2014	Payee name Adjavon, Tsoke
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Amount (\$) \$117.00	Payee address City; State; Zip Code 916 Rochester Castle Way Pflugerville, TX 78660
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor
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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 01/20/2014	Payee name Adjavon, Tsoke
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Amount (\$) \$165.00	Payee address City; State; Zip Code 916 Rochester Castle Way Pflugerville, TX 78660
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor
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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 01/03/2014	Payee name Black, Justine
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Amount (\$) \$60.00	Payee address City; State; Zip Code 7801 Shoal Creek Blvd, Apt 224 Austin, TX 78757
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 2/15 Report: 19/32	2 FILER NAME Eckhardt, Sarah	3 ACCOUNT # (TEC filers) 00000003
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4 Date 01/13/2014	5 Payee name Black, Justine
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6 Amount (\$) \$250.00	7 Payee address City; State; Zip Code 7801 Shoal Creek Blvd, Apt 224 Austin, TX 78757
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor
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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 01/20/2014	Payee name Black, Justine
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Amount (\$) \$250.00	Payee address City; State; Zip Code 7801 Shoal Creek Blvd, Apt 224 Austin, TX 78757
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor
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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 01/06/2014	Payee name Black Austin Democrats
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Amount (\$) \$206.98	Payee address City; State; Zip Code 11500 Oak Trl Austin, TX 78753
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Dues
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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 01/02/2014	Payee name Cervenka, Greg
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Amount (\$) \$966.00	Payee address City; State; Zip Code PO BOX 161150 Austin, TX 78716
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Office rent
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 3/15 Report: 20/32		2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (TEC filers) 00000003	
4 Date 01/15/2014		5 Payee name Checkmark Typesetting			
6 Amount (\$) \$5,676.03		7 Payee address City; State; Zip Code 3217 N. IH 35 Austin, TX 78722			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing - yardsigns	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 01/03/2014		Payee name Daniels, Chris			
Amount (\$) \$115.00		Payee address City; State; Zip Code 3906 Knell Crest Loop Austin, TX 78759			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 01/02/2014		Payee name Facebook, Inc.			
Amount (\$) \$29.19		Payee address City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025-1452			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political online advertising	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 01/06/2014		Payee name Facebook, Inc.			
Amount (\$) \$30.00		Payee address City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025-1452			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political online advertising	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 4/15 Report: 21/32	2 FILER NAME Eckhardt, Sarah	3 ACCOUNT # (TEC filers) 00000003
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4 Date 01/07/2014	5 Payee name Facebook, Inc.
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6 Amount (\$) \$30.00	7 Payee address City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025-1452
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political online advertising
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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 01/10/2014	Payee name Facebook, Inc.
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Amount (\$) \$30.00	Payee address City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025-1452
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political online advertising
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 01/13/2014	Payee name Facebook, Inc.
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Amount (\$) \$30.00	Payee address City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025-1452
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political online advertising
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 01/13/2014	Payee name Facebook, Inc.
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Amount (\$) \$149.00	Payee address City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025-1452
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political online advertising
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 5/15 Report: 22/32	2 FILER NAME Eckhardt, Sarah	3 ACCOUNT # (TEC filers) 00000003
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4 Date 01/16/2014	5 Payee name Facebook, Inc.
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6 Amount (\$) \$29.99	7 Payee address City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025-1452
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political online advertising
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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 01/03/2014	Payee name First Data Merchant Services
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Amount (\$) \$53.55	Payee address City; State; Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342
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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) <input type="checkbox"/> merchant account fees
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 01/03/2014	Payee name First Data Merchant Services
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Amount (\$) \$204.54	Payee address City; State; Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342
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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) <input type="checkbox"/> merchant account fees
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 01/03/2014	Payee name First Data Merchant Services
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Amount (\$) \$293.29	Payee address City; State; Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342
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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) <input type="checkbox"/> merchant account fees
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
------------------------------------------------------------	-------------------------------	----------------	--------------

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 6/15 Report: 23/32	2 FILER NAME Eckhardt, Sarah	3 ACCOUNT # (TEC filers) 00000003
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4 Date 01/02/2014	5 Payee name Gilliam, Thomas
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6 Amount (\$) \$925.00	7 Payee address City; State; Zip Code 2505 Village Trail Circle Austin, TX 78744
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor
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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 01/15/2014	Payee name Gilliam, Thomas
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Amount (\$) \$925.00	Payee address City; State; Zip Code 2505 Village Trail Circle Austin, TX 78744
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor
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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 01/08/2014	Payee name Gragert Jones Research, LLC
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Amount (\$) \$7,500.00	Payee address City; State; Zip Code 222 W. Ontario St., Ste. 500 Chicago, IL 60654
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Research
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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 01/07/2014	Payee name Grande Communications
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Amount (\$) \$556.24	Payee address City; State; Zip Code 1923 E 7th St #100 Austin, TX 78702
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Utilities
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 7/15 Report: 24/32		2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (TEC filers) 00000003	
4 Date 01/02/2014		5 Payee name Hudson, Nick			
6 Amount (\$) \$3,500.00		7 Payee address City; State; Zip Code 5701 S Mo Pac Expy, Apt 1037 Austin, TX 78749			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign manager salary	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 01/08/2014		Payee name In Focus Campaigns			
Amount (\$) \$2,782.01		Payee address City; State; Zip Code PO Box 10726 Fort Worth, TX 76114			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Telephone calls	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 01/03/2014		Payee name LaFave, Daniel			
Amount (\$) \$170.00		Payee address City; State; Zip Code 1515 Wickersham #226 Austin, TX 78741			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 01/13/2014		Payee name LaFave, Daniel			
Amount (\$) \$350.00		Payee address City; State; Zip Code 1515 Wickersham #226 Austin, TX 78741			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
FeesGifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing ExpenseSalaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental ExpenseLoan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 8/15 Report: 25/32		2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (TEC filers) 00000003	
4 Date 01/20/2014		5 Payee name LaFave, Daniel			
6 Amount (\$) \$282.50		7 Payee address City; State; Zip Code 1515 Wickersham #226 Austin, TX 78741			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 01/02/2014		Payee name NGP VAN			
Amount (\$) \$350.00		Payee address City; State; Zip Code 1105 15th Street NW, Ste. 500 Washington, DC 20005			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Database software	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 01/20/2014		Payee name Nunez, Alyssa			
Amount (\$) \$260.00		Payee address City; State; Zip Code 53 Riverbend Dr. San Marcos, TX 78666			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 01/10/2014		Payee name Office Depot			
Amount (\$) \$334.45		Payee address City; State; Zip Code 4501 West Braker Lane Austin, TX 78759			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Office supplies	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
FeesGifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing ExpenseSalaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental ExpenseLoan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 9/15 Report: 26/32		2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (TEC filers) 00000003	
4 Date 01/17/2014	5 Payee name Office Depot				
6 Amount (\$) \$12.97	7 Payee address City; State; Zip Code 4501 West Braker Lane Austin, TX 78759				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Office supplies		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 01/13/2014	Payee name O-K Paper				
Amount (\$) \$138.00	Payee address City; State; Zip Code 9715 Burnet Rd Austin, TX 78758				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Office supplies		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 01/02/2014	Payee name Peter A. Ravella Consulting				
Amount (\$) \$5,000.00	Payee address City; State; Zip Code 4107 Wildwood Rd. Austin, TX 78722				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> General consulting		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 01/02/2014	Payee name Peter A. Ravella Consulting				
Amount (\$) \$5,000.00	Payee address City; State; Zip Code 4107 Wildwood Rd. Austin, TX 78722				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> General consulting		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 10/15 Report: 27/32	2 FILER NAME Eckhardt, Sarah	3 ACCOUNT # (TEC filers) 00000003
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4 Date 01/14/2014	5 Payee name Postmaster
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6 Amount (\$) \$132.00	7 Payee address City; State; Zip Code 3507 N. Lamar Blvd. Austin, TX 78705-9997
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage
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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 01/15/2014	Payee name Postmaster
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Amount (\$) \$92.00	Payee address City; State; Zip Code 3507 N. Lamar Blvd. Austin, TX 78705-9997
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8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage
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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 01/13/2014	Payee name Prieto, Rene
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Amount (\$) \$250.00	Payee address City; State; Zip Code 2505 Village Trail Circle Austin, TX 78744
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8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor
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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 01/20/2014	Payee name Prieto, Rene
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Amount (\$) \$195.00	Payee address City; State; Zip Code 2505 Village Trail Circle Austin, TX 78744
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8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 11/15 Report: 28/32	2 FILER NAME Eckhardt, Sarah	3 ACCOUNT # (TEC filers) 00000003
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4 Date 01/13/2014	5 Payee name Pritchard, Casey
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6 Amount (\$) \$192.00	7 Payee address City; State; Zip Code 7117 Woodhollow Dr. Austin, TX 78731
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor
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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 01/20/2014	Payee name Pritchard, Casey
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Amount (\$) \$195.00	Payee address City; State; Zip Code 7117 Woodhollow Dr. Austin, TX 78731
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor
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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 01/13/2014	Payee name Rountree, Chelsea
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Amount (\$) \$110.00	Payee address City; State; Zip Code 700 Mandarin Flyway, \$1504 Austin, TX 78613
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor
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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 01/20/2014	Payee name Sabogal, Hector
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Amount (\$) \$105.00	Payee address City; State; Zip Code 2803 Hemphill Park #610 Austin, TX 78705
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 12/15 Report: 29/32	2 FILER NAME Eckhardt, Sarah	3 ACCOUNT # (TEC filers) 00000003
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4 Date 01/03/2014	5 Payee name San Luis, Natalie
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6 Amount (\$) \$50.00	7 Payee address City; State; Zip Code 3000 University Ave. Austin, TX 78705
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor
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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 01/13/2014	Payee name San Luis, Natalie
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Amount (\$) \$100.00	Payee address City; State; Zip Code 3000 University Ave. Austin, TX 78705
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8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor
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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 01/20/2014	Payee name San Luis, Natalie
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Amount (\$) \$100.00	Payee address City; State; Zip Code 3000 University Ave. Austin, TX 78705
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8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor
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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 01/02/2014	Payee name Shea, Caitlin
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Amount (\$) \$1,250.00	Payee address City; State; Zip Code 12223 Tyson Cv Austin, TX 78758
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8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Field Director salary
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 13/15 Report: 30/32		2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (TEC filers) 00000003	
4 Date 01/15/2014		5 Payee name Shea, Caitlin			
6 Amount (\$) \$1,250.00		7 Payee address City; State; Zip Code 12223 Tyson Cv Austin, TX 78758			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Field Director salary	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 01/03/2014		Payee name Spears, Eric			
Amount (\$) \$228.30		Payee address City; State; Zip Code 3213 Centrum Dr. Austin, TX 78754			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 01/13/2014		Payee name Spears, Eric			
Amount (\$) \$342.50		Payee address City; State; Zip Code 3213 Centrum Dr. Austin, TX 78754			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 01/20/2014		Payee name Spears, Eric			
Amount (\$) \$272.50		Payee address City; State; Zip Code 3213 Centrum Dr. Austin, TX 78754			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 14/15 Report: 31/32	2 FILER NAME Eckhardt, Sarah	3 ACCOUNT # (TEC filers) 00000003
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4 Date 01/03/2014	5 Payee name Staples
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6 Amount (\$) \$71.42	7 Payee address City; State; Zip Code 1201 Barbara Jordan Blvd Austin, TX 78723
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Office supplies
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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 01/10/2014	Payee name Staples
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Amount (\$) \$10.14	Payee address City; State; Zip Code 1201 Barbara Jordan Blvd Austin, TX 78723
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Office supplies
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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 01/17/2014	Payee name Staples
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Amount (\$) \$85.34	Payee address City; State; Zip Code 1201 Barbara Jordan Blvd Austin, TX 78723
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Office supplies
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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 01/01/2014	Payee name Susan Harry Consulting
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Amount (\$) \$3,250.00	Payee address City; State; Zip Code P.O. Box 301074 Austin, TX 78703
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fundraising & compliance consulting
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 15/15 Report: 32/32	2 FILER NAME Eckhardt, Sarah	3 ACCOUNT # (TEC filers) 00000003
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4 Date 01/02/2014	5 Payee name Susan Harry Consulting
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6 Amount (\$) \$3,250.00	7 Payee address City; State; Zip Code P.O. Box 301074 Austin, TX 78703
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fundraising & compliance consulting
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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 01/02/2014	Payee name Texas Made Productions
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Amount (\$) \$150.00	Payee address City; State; Zip Code 3005 S Lamar Blvd, Suite D-109 #234 Austin, TX 78704
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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) <input type="checkbox"/> Video production
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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 01/06/2014	Payee name Travis County Democratic Party
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Amount (\$) \$500.00	Payee address City; State; Zip Code 1311 E 6th St Ste B Austin, TX 78701
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political donation
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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