

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

8325

# FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.		<b>1 ACCOUNT #</b> (Ethics Commission filers) 00000003	<b>2 PAGE #</b> 1 of 95
<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	MS / MRS / MR                      FIRST                      MI Sarah ----- NICKNAME                      LAST                      SUFFIX Eckhardt	<b>OFFICE USE ONLY</b> <hr/> Date Received <div style="text-align: center;">                     FILED                      2014 FEB 24                      4:50 PM                      Travis County                      Travis County Courthouse                 </div> <hr/> Date Hand-delivered or Date Postmarked <hr/> Receipt #                      Amount <hr/> Date Processed <hr/> Date Imaged	
<b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b>  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX;    APT / SUITE #;                      CITY;                      STATE;                      ZIP CODE P.O. Box 301586 Austin, TX 78703		
<b>5 CAMPAIGN TREASURER NAME</b>	MS / MRS / MR                      FIRST                      MI Carol ----- NICKNAME                      LAST                      SUFFIX Hatfield		
<b>6 CAMPAIGN TREASURER ADDRESS</b> (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE);    APT / SUITE #;                      CITY;                      STATE;                      ZIP CODE 3404 Northwood Circle Austin, TX 78703		
<b>7 CAMPAIGN TREASURER PHONE</b>	AREA CODE                      PHONE NUMBER                      EXTENSION (512) 459-5841		
<b>8 REPORT TYPE</b>	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
<b>9 PERIOD COVERED</b>	Month                      Day                      Year                      Month                      Day                      Year 01/24/2014                      THROUGH                      02/22/2014		
<b>10 ELECTION</b>	ELECTION DATE Month                      Day                      Year 03/04/2014	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	
<b>11 OFFICE</b>	OFFICE HELD (if any)	<b>12 OFFICE SOUGHT (if known)</b> Travis County Judge	
<b>GO TO PAGE 2</b>			

# 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
<input checked="" type="checkbox"/> GENERAL	BOR PAC
<input type="checkbox"/> SPECIFIC	
COMMITTEE ADDRESS	
4505 Duval St #229 Austin, TX 78751	
COMMITTEE CAMPAIGN TREASURER NAME	
Haenschen, Katherine	
COMMITTEE CAMPAIGN TREASURER ADDRESS	
4505 Duval St #229 Austin, TX 78751	

additional pages

16 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 6,924.00
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2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 93,046.83
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EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 681.43
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4. TOTAL POLITICAL EXPENDITURES	\$ 149,660.23
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CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 15,186.73
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OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 10,000.00
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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 24<sup>th</sup> day of February, 20 14, 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

# CANDIDATE / OFFICEHOLDER REPORT: NOTICE FROM POLITICAL COMMITTEE(S)

## FORM C/OH ADDENDUM

Page 3 of 95

C/OH NAME Eckhardt, Sarah		ACCOUNT # (Ethics Commission filers) 00000003
17 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 ChangeAustin.org
	<input checked="" type="checkbox"/> GENERAL	COMMITTEE ADDRESS PO Box 4063 Austin, TX 78765
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME Curtis, Linda
	COMMITTEE CAMPAIGN TREASURER ADDRESS	PO Box 4063 Austin, TX 78765
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 The Sierra Club Political Committee of Texas
	<input checked="" type="checkbox"/> GENERAL	COMMITTEE ADDRESS 615 Willow San Antonio, TX 78202
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME Gonzalez, Hector
	COMMITTEE CAMPAIGN TREASURER ADDRESS	615 Willow San Antonio, TX 78202

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/62 Report: 4/95	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date  02/01/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Agnew, Ginny ..... 6 Contributor address; City; State; Zip Code 1204 Castle Hill St Austin, TX 78703	7 Amount of contribution (\$)  \$55.00	8 In-kind contribution description (if applicable) Event expenses
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  02/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Albert, David ..... Contributor address; City; State; Zip Code 1700 Burton Dr Apt 158 Austin, TX 78741-2910	Amount of contribution (\$)  \$250.00	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  02/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Aldredge, Tenley ..... Contributor address; City; State; Zip Code 916 W Monroe St Austin, TX 78704	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  01/27/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Alvarez, Raul & Theresa ..... Contributor address; City; State; Zip Code 2601 Zaragosa St Austin, TX 78702-3928	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  02/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Anderson, John ..... Contributor address; City; State; Zip Code PO Box 1965 Alpine, TX 79831-1965	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: 2/62 Report: 5/95	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date  02/10/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Appel, Louis  6 Contributor address; City; State; Zip Code 721 Patterson Ave Austin, TX 78703-4723	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  02/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Arnold, Forrest  Contributor address; City; State; Zip Code 4 Sunset Trl Sunset Valley, TX 78745-2615	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  01/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Arnold, Mary  Contributor address; City; State; Zip Code 3404 Southill Cir Austin, TX 78703-1046	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  01/27/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Auten, Roseana  Contributor address; City; State; Zip Code 1507 Yaupon Valley Rd West Lake Hills, TX 78746	Amount of contribution (\$)  \$1,000.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  02/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ayres, Patricia  Contributor address; City; State; Zip Code 5705 Scout Island Cv Austin, TX 78731-3386	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)	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The <b>INSTRUCTION GUIDE</b> explains how to complete this form.		<b>1</b> PAGE # Schedule: 3/62 Report: 6/95	
<b>2</b> FILER NAME Eckhardt, Sarah		<b>3</b> ACCOUNT # (Ethics Commission filers) 00000003	
<b>4</b> Date  02/04/2014	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ayres, Robert  ..... <b>6</b> Contributor address; City; State; Zip Code 2408 Keating Ln Austin, TX 78703-2342	<b>7</b> Amount of contribution (\$)  \$500.00	<b>8</b> In-kind contribution description (if applicable)         (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	
Date  02/07/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bailey, Donna  ..... Contributor address; City; State; Zip Code 2003 Forest Trl Austin, TX 78703-2929	Amount of contribution (\$)  \$300.00	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  02/07/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Baker, Roger  ..... Contributor address; City; State; Zip Code 1303 Bentwood Rd Austin, TX 78722	Amount of contribution (\$)  \$300.00	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  02/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Balch, David  ..... Contributor address; City; State; Zip Code 10412 Canyon Vista Way Austin, TX 78726	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  01/27/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Banks, Aletta  ..... Contributor address; City; State; Zip Code 9616 Copper Creek Dr Austin, TX 78729	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: 5/62 Report: 8/95	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date  01/24/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bernhardt, Rebecca  6 Contributor address; City; State; Zip Code 4603 Placid Pl Austin, TX 78731-5514	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date  02/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Blackshire, Scott  Contributor address; City; State; Zip Code 2411 E 10th St Austin, TX 78702-3505	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date  02/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bone, Barry  Contributor address; City; State; Zip Code 6 Rock Way Cv Austin, TX 78746-4669	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  01/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bower, Douglas  Contributor address; City; State; Zip Code 6916 Larue Belle Cv Austin, TX 78739-2067	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date  02/11/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Boyd, Bill  Contributor address; City; State; Zip Code 2400 Hancock Dr Austin, TX 78756-2513	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: 6/62 Report: 9/95	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date  01/31/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Boyd, Kathleen  6 Contributor address; City; State; Zip Code 603 Gladys St Houston, TX 77009-7401	7 Amount of contribution (\$)  \$125.00	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"/>	
10 Employer (See Instructions)			
Date  02/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Boyd, Kevin  Contributor address; City; State; Zip Code 507 W 10th St Austin, TX 78701-2120	Amount of contribution (\$)  \$300.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date  02/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bradford, Daniel  Contributor address; City; State; Zip Code 2929A E 13th St Austin, TX 78702-2419	Amount of contribution (\$)  \$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"/>	
Employer (See Instructions)			
Date  02/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bradford, Daniel  Contributor address; City; State; Zip Code 2929A E 13th St Austin, TX 78702-2419	Amount of contribution (\$)  \$150.00	In-kind contribution description (if applicable) Event expenses
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date  02/14/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Breeze, Bob  Contributor address; City; State; Zip Code 4815 Avenue G Austin, TX 78751-2522	Amount of contribution (\$)  \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The <b>INSTRUCTION GUIDE</b> explains how to complete this form.		<b>1</b> PAGE # Schedule: 7/62 Report: 10/95	
<b>2</b> FILER NAME Eckhardt, Sarah		<b>3</b> ACCOUNT # (Ethics Commission filers) 00000003	
<b>4</b> Date  02/11/2014	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brooks, Suzee  ..... <b>6</b> Contributor address; City; State; Zip Code 4900 Avenue H Austin, TX 78751	<b>7</b> Amount of contribution (\$)  \$150.00	<b>8</b> In-kind contribution description (if applicable) Event expenses
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	
<b>4</b> Date  02/01/2014	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Buendel, Christine  ..... <b>6</b> Contributor address; City; State; Zip Code 1200 Elm St Apt 211 Apt 211 Austin, TX 78703	<b>7</b> Amount of contribution (\$)  \$100.00	<b>8</b> In-kind contribution description (if applicable)
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	
<b>4</b> Date  02/16/2014	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Burr, Lize  ..... <b>6</b> Contributor address; City; State; Zip Code 4107 Sinclair Ave Austin, TX 78756	<b>7</b> Amount of contribution (\$)  \$128.00	<b>8</b> In-kind contribution description (if applicable) Event expenses
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	
<b>4</b> Date  01/31/2014	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Butler, Alma  ..... <b>6</b> Contributor address; City; State; Zip Code 15902 Seattle St Jersey Village, TX 77040-3032	<b>7</b> Amount of contribution (\$)  \$125.00	<b>8</b> In-kind contribution description (if applicable)
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	
<b>4</b> Date  02/13/2014	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Buttrey, Jerrold  ..... <b>6</b> Contributor address; City; State; Zip Code 103 W 33rd St Austin, TX 78705-2313	<b>7</b> Amount of contribution (\$)  \$100.00	<b>8</b> In-kind contribution description (if applicable)
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/62 Report: 11/95	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date 02/18/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Byrne, Daniel 6 Contributor address; City; State; Zip Code 36 Sundown Pkwy Ste 2000 Austin, TX 78746	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 01/27/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cartwright, Dorsey Contributor address; City; State; Zip Code 1715 Norris Dr Austin, TX 78704	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 02/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cartwright, Dorsey Contributor address; City; State; Zip Code 1715 Norris Dr Austin, TX 78704	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 02/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cartwright, Dorsey Contributor address; City; State; Zip Code 1715 Norris Dr Austin, TX 78704	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 02/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cawthon, Lance Contributor address; City; State; Zip Code 2515 Wilson St Austin, TX 78704	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 9/62 Report: 12/95	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date  02/01/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cespedes, Carol  6 Contributor address; City; State; Zip Code 7300 Callbram Ln Austin, TX 78736-3100	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  02/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chan, Raymond  Contributor address; City; State; Zip Code 1605 Churchwood Cv Austin, TX 78746	Amount of contribution (\$)  \$1,000.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  02/14/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chen, Sheng Ting  Contributor address; City; State; Zip Code 5000 Mission Oaks Blvd Unit 24 Austin, TX 78735-6742	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  02/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cheney, Victoria  Contributor address; City; State; Zip Code 3205 Warren St Austin, TX 78703-1020	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  02/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cherian, Antony  Contributor address; City; State; Zip Code 5807 Lookout Mountain Dr. Austin, TX 78731	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: 11/62 Report: 14/95	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date  02/13/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Coldiron, Ron  6 Contributor address; City; State; Zip Code 6509 Marblewood Dr Austin, TX 78731-1744	7 Amount of contribution (\$)  \$250.00	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  02/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Coleman, Edward  Contributor address; City; State; Zip Code 7503 Stepdown Cv Austin, TX 78731-1141	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  02/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Coleman-Beattie, Brenda  Contributor address; City; State; Zip Code 8402 Burkwood Cv Austin, TX 78735	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  01/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Colvin, Elizabeth  Contributor address; City; State; Zip Code 1932 Antone St Austin, TX 78723-5443	Amount of contribution (\$)  \$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  02/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Colvin, Elizabeth  Contributor address; City; State; Zip Code 1932 Antone St Austin, TX 78723-5443	Amount of contribution (\$)  \$50.00	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: 12/62 Report: 15/95	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date  02/22/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Conard, Phil  6 Contributor address; City; State; Zip Code 2402 W 7th St Austin, TX 78703-4315	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  02/07/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Connolly, Colleen  Contributor address; City; State; Zip Code 1407 W 10th St Austin, TX 78703-4816	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  01/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Conroy, Michael  Contributor address; City; State; Zip Code 503 Cater Dr Austin, TX 78704-1411	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  01/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Constantine, Robert  Contributor address; City; State; Zip Code 13100 Kellies Farm Lane Austin, TX 78727	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  02/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cooper, Gary  Contributor address; City; State; Zip Code 4907 Bull Mountain Cv Austin, TX 78746-2402	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 14/62 Report: 17/95	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date  02/04/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cyrler, John  6 Contributor address; City; State; Zip Code 1301 Westwood Rd Austin, TX 78722	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  02/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Daigle, Scott  Contributor address; City; State; Zip Code 1725 Toomey Rd Apt 311 Austin, TX 78704	Amount of contribution (\$)  \$150.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  02/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dale, Judith  Contributor address; City; State; Zip Code 1105 Wild Basin Ldg Austin, TX 78746-2740	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  02/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dawson, Clint  Contributor address; City; State; Zip Code 4317 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  01/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) De Gregori, Tom  Contributor address; City; State; Zip Code 2327 Goldsmith St Houston, TX 77030-1129	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: 16/62 Report: 19/95	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date  02/22/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dillon, Martha  6 Contributor address; City; State; Zip Code 6410 Earlyway Dr Austin, TX 78749-1632	7 Amount of contribution (\$)  \$25.00	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  02/14/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Duncan, James  Contributor address; City; State; Zip Code 360 Nueces St Apt 2701 Austin, TX 78701-4270	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  02/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Duncan, Roger  Contributor address; City; State; Zip Code 2304 Spring Creek Dr. Austin, TX 78704	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  02/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dusing, Leslie  Contributor address; City; State; Zip Code 8805 Dittmar Oaks Dr Austin, TX 78748-6587	Amount of contribution (\$)  \$75.00	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  01/31/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Einfalt, Mark  Contributor address; City; State; Zip Code 1203 Woodlawn Dr Pflugerville, TX 78660-2917	Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		<b>1</b> PAGE # Schedule: 18/62 Report: 21/95	
<b>2</b> FILER NAME Eckhardt, Sarah		<b>3</b> ACCOUNT # (Ethics Commission filers) 00000003	
<b>4</b> Date  02/15/2014	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Espinoza, Edward  <b>6</b> Contributor address; City; State; Zip Code 507 Pressler St # 507 Austin, TX 78703-5151	<b>7</b> Amount of contribution (\$)  \$100.00	<b>8</b> In-kind contribution description (if applicable)    (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	
Date  02/05/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Farb, Aubrey  Contributor address; City; State; Zip Code 9043 Briar Forest Dr Houston, TX 77024-7220	Amount of contribution (\$)  \$70.00	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  02/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Farb, Loretta  Contributor address; City; State; Zip Code 206 W Covington Dr Austin, TX 78753-2614	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  01/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Farb, Sylvia  Contributor address; City; State; Zip Code 9043 Briar Forest Dr Houston, TX 77024-7220	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  01/31/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Farenthold, Sissy  Contributor address; City; State; Zip Code 2929 Buffalo Speedway Unit 1873 Houston, TX 77098	Amount of contribution (\$)  \$225.00	In-kind contribution description (if applicable) Event expenses    (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: 19/62 Report: 22/95	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date  02/03/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fatzter, Sylvia  6 Contributor address; City; State; Zip Code 2003 Red Fox Rd Austin, TX 78734-2924	7 Amount of contribution (\$)  \$500.00	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  02/20/2014	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)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date  01/29/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Feuerbacher, Carl  Contributor address; City; State; Zip Code 8312 Navidad Dr Austin, TX 78735-1436	Amount of contribution (\$)  \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date  02/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fischer, Norman  Contributor address; City; State; Zip Code 2515 Harris Blvd Austin, TX 78703-2448	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  01/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fletcher, Carol  Contributor address; City; State; Zip Code 505 Parkview Dr Pflugerville, TX 78660	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 <b>INSTRUCTION GUIDE</b> explains how to complete this form.		<b>1</b> PAGE # Schedule: 21/62 Report: 24/95	
<b>2</b> FILER NAME Eckhardt, Sarah		<b>3</b> ACCOUNT # (Ethics Commission filers) 00000003	
<b>4</b> Date  02/19/2014	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Frederick, David  ..... <b>6</b> Contributor address; City; State; Zip Code 414 Ridgewood Rd West Lake Hills, TX 78746	<b>7</b> Amount of contribution (\$)  \$150.00	<b>8</b> In-kind contribution description (if applicable)          (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	
Date  01/29/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Friday, Philip Jr.  ..... Contributor address; City; State; Zip Code 1100 Guadalupe St Austin, TX 78701-2116	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  02/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Friedholm, DeAnn  ..... Contributor address; City; State; Zip Code 4314 Sinclair Ave Austin, TX 78756-3219	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  02/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Friedholm, DeAnn  ..... Contributor address; City; State; Zip Code 4314 Sinclair Ave Austin, TX 78756-3219	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  02/05/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fuentes, Francisco Jr  ..... Contributor address; City; State; Zip Code 6502 Alasan Cv Austin, TX 78730-2717	Amount of contribution (\$)  \$1,000.00	In-kind contribution description (if applicable)          (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		<b>1</b> PAGE # Schedule: 23/62 Report: 26/95	
<b>2</b> FILER NAME Eckhardt, Sarah		<b>3</b> ACCOUNT # (Ethics Commission filers) 00000003	
<b>4</b> Date  02/11/2014	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Graham, Ann  <b>6</b> Contributor address; City; State; Zip Code 3815 Avenue H Austin, TX 78751-4718	<b>7</b> Amount of contribution (\$)  \$16.00	<b>8</b> In-kind contribution description (if applicable) Event expenses
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	
Date  02/11/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Graham, Ann  Contributor address; City; State; Zip Code 3815 Avenue H Austin, TX 78751-4718	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  02/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Graham, Ann S  Contributor address; City; State; Zip Code 3815 Avenue H Austin, TX 78751-4718	Amount of contribution (\$)  \$35.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  02/07/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Greenstein, Malcolm  Contributor address; City; State; Zip Code 1006 E Cesar Chavez St Austin, TX 78702-4208	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  01/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Greenway, Virginia  Contributor address; City; State; Zip Code 811 Nueces St Austin, TX 78701-2215	Amount of contribution (\$)  \$300.00	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: 24/62 Report: 27/95	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date 02/07/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Greer, Andrea  6 Contributor address; City; State; Zip Code 606 Highland St Houston, TX 77009-6629	7 Amount of contribution (\$) \$150.00	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 01/31/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Greer, Gayle  Contributor address; City; State; Zip Code 2651 Helena St Houston, TX 77006-1535	Amount of contribution (\$) \$75.00	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 02/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Grinbergs, Mikus  Contributor address; City; State; Zip Code PO Box 26626 Austin, TX 78755-0626	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 02/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Grisham, Jenny  Contributor address; City; State; Zip Code 1102 E 8th St Austin, TX 78702-3225	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 02/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gritzka, Angelika  Contributor address; City; State; Zip Code 4431 Crestway Dr Austin, TX 78731	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 25/62 Report: 28/95	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date 02/02/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hamilton, Dagmar ..... 6 Contributor address; City; State; Zip Code 403 Allegro Ln West Lake Hills, TX 78746	7 Amount of contribution (\$) \$150.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 01/24/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hamilton, William ..... 6 Contributor address; City; State; Zip Code 1306 Garden St. Austin, TX 78702	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 02/22/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hamilton, William ..... 6 Contributor address; City; State; Zip Code 1306 Garden St. Austin, TX 78702	7 Amount of contribution (\$) \$300.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 02/21/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hanks, Whit ..... 6 Contributor address; City; State; Zip Code 558 Tom Sawyer Rd Dripping Springs, TX 78620-4319	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 02/20/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hardin, Richard ..... 6 Contributor address; City; State; Zip Code PO Box 5628 Austin, TX 78763-5628	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 27/62 Report: 30/95	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date  02/18/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hatch, Tom  6 Contributor address; City; State; Zip Code 1102B E 8th St Austin, TX 78702-3225	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  02/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hatch, Tom  Contributor address; City; State; Zip Code 1102B E 8th St Austin, TX 78702-3225	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  02/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hatfield, Carol  Contributor address; City; State; Zip Code 3404 Northwood Cir Austin, TX 78703	Amount of contribution (\$)  \$300.00	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  01/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hawthorne, Melissa  Contributor address; City; State; Zip Code 1403 Foxwood Cv Austin, TX 78704-2718	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  01/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Heidrick, Clarke  Contributor address; City; State; Zip Code 3702 Eastledge Dr Ste 2200 Austin, TX 78731	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 <b>INSTRUCTION GUIDE</b> explains how to complete this form.		<b>1</b> PAGE # Schedule: 28/62 Report: 31/95	
<b>2</b> FILER NAME Eckhardt, Sarah		<b>3</b> ACCOUNT # (Ethics Commission filers) 00000003	
<b>4</b> Date  01/31/2014	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Heinley, BJ  <b>6</b> Contributor address; City; State; Zip Code 810 Blanco St Austin, TX 78703-4912	<b>7</b> Amount of contribution (\$)  \$250.00	<b>8</b> In-kind contribution description (if applicable) Event expenses   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	
Date  02/07/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Herron, Cindy  Contributor address; City; State; Zip Code 1602 Whitney Way Austin, TX 78741-3220	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  01/29/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Herzele, Charlotte  Contributor address; City; State; Zip Code 3916 Avenue H Austin, TX 78751-4721	Amount of contribution (\$)  \$1,000.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  02/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hess, Myron  Contributor address; City; State; Zip Code 1705 Margaret St Austin, TX 78704-2121	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  02/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hinton, Susan  Contributor address; City; State; Zip Code 2 Jeffery Cv Austin, TX 78746-5568	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: 29/62 Report: 32/95	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date  02/10/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Holderness, Earl  6 Contributor address; City; State; Zip Code 2943 Thousand Oaks Dr Austin, TX 78746-7661	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date  02/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Holmes, Bonny  Contributor address; City; State; Zip Code 2009 Prather Ln Austin, TX 78704-6717	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date  02/16/2014	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)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date  02/18/2014	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)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date  01/29/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Houston Federation of Teachers Cope  Contributor address; City; State; Zip Code 3100 Wesleyan St Ste 255 Houston, TX 77027-5752	Amount of contribution (\$)  \$125.00	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: 33/62 Report: 36/95	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date  02/16/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kramer, Kenneth  6 Contributor address; City; State; Zip Code 4204 Sinclair Ave Austin, TX 78756-3527	7 Amount of contribution (\$)  \$500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  01/27/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kush, Steve  Contributor address; City; State; Zip Code 1500 Wild Basin Ledge Austin, TX 78746	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  02/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kush, Steve  Contributor address; City; State; Zip Code 1500 Wild Basin Ledge Austin, TX 78746	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  02/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kush, Steve  Contributor address; City; State; Zip Code 1500 Wild Basin Ledge Austin, TX 78746	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  01/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lagmanson, Liz  Contributor address; City; State; Zip Code 10601 Hill Drive Austin, TX 78641	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: 36/62 Report: 39/95	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date  02/13/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lightsey, Rebecca  6 Contributor address; City; State; Zip Code 520 Academy Dr Austin, TX 78704	7 Amount of contribution (\$)  \$175.00	8 In-kind contribution description (if applicable) Event expenses   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  02/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Linklater, Richard  Contributor address; City; State; Zip Code PO Box 13351 Austin, TX 78711-3351	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  02/04/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lober, James  Contributor address; City; State; Zip Code 7017 Staffordshire St Houston, TX 77030-4111	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  02/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Loehman, Jon  Contributor address; City; State; Zip Code 900 Yaupon Valley Rd West Lake Hills, TX 78746-3550	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  02/18/2014	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 (\$)  \$1,000.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 37/62 Report: 40/95	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date  02/19/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lowe, Kyle  6 Contributor address; City; State; Zip Code 800 Rio Grande St Austin, TX 78701-2220	7 Amount of contribution (\$)  \$300.00	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  02/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Luciano, Richard  Contributor address; City; State; Zip Code 2500 Greenlee Dr Austin, TX 78703	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)          (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  02/11/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lulic, Nada  Contributor address; City; State; Zip Code 5423 Shoalwood Ave Austin, TX 78756-1619	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  02/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lundy, Eileen  Contributor address; City; State; Zip Code 1112 Wild Basin Ldg West Lake Hills, TX 78746-2708	Amount of contribution (\$)  \$300.00	In-kind contribution description (if applicable) Event expenses          (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  02/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Luther, Jessica  Contributor address; City; State; Zip Code 8601 Dawnridge Cir Austin, TX 78757	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)          (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 38/62 Report: 41/95	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date  02/10/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) MacDonald, Hillary  6 Contributor address; City; State; Zip Code 1904 Bissel Ln Austin, TX 78745-4912	7 Amount of contribution (\$)  \$250.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  02/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mann, Bob  Contributor address; City; State; Zip Code 13234 Kerrville Folkway Austin, TX 78729	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  02/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Marler, Sara  Contributor address; City; State; Zip Code 2705 Mountain Laurel Dr Austin, TX 78703-1139	Amount of contribution (\$)  \$175.00	In-kind contribution description (if applicable) Event expenses
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  02/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Marler, Sara  Contributor address; City; State; Zip Code 2705 Mountain Laurel Dr Austin, TX 78703-1139	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  02/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Marsden, Julia  Contributor address; City; State; Zip Code 1701 Spyglass Dr Apt 11 Austin, TX 78746-7989	Amount of contribution (\$)  \$5,000.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		<b>1</b> PAGE # Schedule: 39/62 Report: 42/95	
<b>2</b> FILER NAME Eckhardt, Sarah		<b>3</b> ACCOUNT # (Ethics Commission filers) 00000003	
<b>4</b> Date  02/16/2014	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martin, Samuel  ..... <b>6</b> Contributor address; City; State; Zip Code 1901 Travis Heights Blvd Austin, TX 78704-3639	<b>7</b> Amount of contribution (\$)  \$100.00	<b>8</b> In-kind contribution description (if applicable)         (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	
Date  02/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martinich, Leslie  ..... Contributor address; City; State; Zip Code 1114 Wild Basin Ldg West Lake Hills, TX 78746-2708	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  01/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McCarty, Jane  ..... Contributor address; City; State; Zip Code 3300 Dolphin Dr Austin, TX 78704-6029	Amount of contribution (\$)  \$35.00	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  02/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McCarty, Jane  ..... Contributor address; City; State; Zip Code 3300 Dolphin Dr Austin, TX 78704-6029	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)         (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  02/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McCormoll, Leslie  ..... Contributor address; City; State; Zip Code 507 Kingfisher Creek Dr Austin, TX 78748	Amount of contribution (\$)  \$150.00	In-kind contribution description (if applicable)         (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 40/62 Report: 43/95	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date  01/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McIntyre, Frances  6 Contributor address; City; State; Zip Code 6305 Treadwell Blvd Austin, TX 78757-4321	7 Amount of contribution (\$)  \$150.00	8 In-kind contribution description (if applicable) Event expenses   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  01/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McIntyre, Frances  Contributor address; City; State; Zip Code 6305 Treadwell Blvd Austin, TX 78757-4321	Amount of contribution (\$)  \$25.00	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  02/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McIntyre, Frances  Contributor address; City; State; Zip Code 6305 Treadwell Blvd Austin, TX 78757-4321	Amount of contribution (\$)  \$35.00	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  02/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McLeroy, Melanie  Contributor address; City; State; Zip Code 3409 Far View Dr Austin, TX 78756	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  01/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McNutt, Phillip  Contributor address; City; State; Zip Code 1510 Forest Cove Dr Kingwood, TX 77339-3240	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: 41/62 Report: 44/95	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date  02/21/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Meza 2300, LLC  6 Contributor address; City; State; Zip Code 2300 E Cesar Chavez St Austin, TX 78702-4604	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  02/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Michel, Lorri  Contributor address; City; State; Zip Code 917 W Lynn St Austin, TX 78703-4747	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  02/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Middleton, Jim  Contributor address; City; State; Zip Code 908 W Monroe St Austin, TX 78704-3405	Amount of contribution (\$)  \$25.00	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  02/15/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Middleton, Jim  Contributor address; City; State; Zip Code 908 W Monroe St Austin, TX 78704-3405	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  01/27/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mitchell, Kirk  Contributor address; City; State; Zip Code PO Box 4023 Austin, TX 78765	Amount of contribution (\$)  \$8,000.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The <b>INSTRUCTION GUIDE</b> explains how to complete this form.		<b>1</b> PAGE # Schedule: 42/62 Report: 45/95	
<b>2</b> FILER NAME Eckhardt, Sarah		<b>3</b> ACCOUNT # (Ethics Commission filers) 00000003	
<b>4</b> Date  02/13/2014	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moffat, Susan  <b>6</b> Contributor address; City; State; Zip Code 4112 Speedway Austin, TX 78751-4630	<b>7</b> Amount of contribution (\$)  \$250.00	<b>8</b> In-kind contribution description (if applicable)    (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	
Date  02/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moffat, Susan  Contributor address; City; State; Zip Code 4112 Speedway Austin, TX 78751-4630	Amount of contribution (\$)  \$350.00	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  02/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moffett, Christy  Contributor address; City; State; Zip Code 1205 Brophy Dr Pflugerville, TX 78660-2922	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  02/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morrison, Chet  Contributor address; City; State; Zip Code 4210 Spicewood Springs Rd Ste 211 Austin, TX 78759-8654	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  01/31/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mosier, Diane  Contributor address; City; State; Zip Code 1321 W 21st St Houston, TX 77008-1601	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: 44/62 Report: 47/95	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date  02/10/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Neely, Mary Ann  6 Contributor address; City; State; Zip Code 1908 Barton Pkwy Austin, TX 78704	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  02/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Neuman, David  Contributor address; City; State; Zip Code .1206 Norwood Rd Austin, TX 78722-1030	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  01/29/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nichols, William Jr  Contributor address; City; State; Zip Code 3906 Houston Rd Del Valle, TX 78617-3064	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  02/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nowlin, Carrol  Contributor address; City; State; Zip Code 6707 Oasis Dr Austin, TX 78749-2713	Amount of contribution (\$)  \$35.00	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  02/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nowlin, Carrol  Contributor address; City; State; Zip Code 6707 Oasis Dr Austin, TX 78749-2713	Amount of contribution (\$)  \$35.00	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: 45/62 Report: 48/95	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date  01/27/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Orange, Margit  6 Contributor address; City; State; Zip Code 8806 Point West Dr Austin, TX 78759-7351	7 Amount of contribution (\$)  \$75.00	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"/>	
10 Employer (See Instructions)			
Date  02/11/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) O'Rourke, Terence  Contributor address; City; State; Zip Code 3227 S Braeswood Blvd Houston, TX 77025	Amount of contribution (\$)  \$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"/>	
Employer (See Instructions)			
Date  02/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ozer, Robert  Contributor address; City; State; Zip Code 2612 Delwood Pl Austin, TX 78703-1734	Amount of contribution (\$)  \$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"/>	
Employer (See Instructions)			
Date  02/14/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Palmer, Janet  Contributor address; City; State; Zip Code 5505 Hero Dr Austin, TX 78735-6257	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date  02/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Palmer, Janet  Contributor address; City; State; Zip Code 5505 Hero Dr Austin, TX 78735-6257	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 46/62 Report: 49/95	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date  02/03/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Parish, James  6 Contributor address; City; State; Zip Code PO Box 13145 Austin, TX 78711	7 Amount of contribution (\$)  \$300.00	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  02/14/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Parken, Ed  Contributor address; City; State; Zip Code 7917 W Rim Dr Austin, TX 78731	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  02/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Penridge, Nell  Contributor address; City; State; Zip Code 15100 Hamilton Pool Rd Austin, TX 78738-7619	Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date  02/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Person, Lori  Contributor address; City; State; Zip Code 5213 Tortuga Trl Austin, TX 78731-4501	Amount of contribution (\$)  \$75.00	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  02/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pflugerville Fire Fighters PAC  Contributor address; City; State; Zip Code PO Box 2615 Pflugerville, TX 78691-2615	Amount of contribution (\$)  \$2,000.00	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"/>			

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		<b>1</b> PAGE # Schedule: 47/62 Report: 50/95	
<b>2</b> FILER NAME Eckhardt, Sarah		<b>3</b> ACCOUNT # (Ethics Commission filers) 00000003	
<b>4</b> Date  02/12/2014	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pitts, Loree  ..... <b>6</b> Contributor address; City; State; Zip Code 8413 Bell Mountain Dr Austin, TX 78730-2829	<b>7</b> Amount of contribution (\$)  \$200.00	<b>8</b> In-kind contribution description (if applicable)          <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	
Date  01/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Powerfin Partners, LLP  ..... Contributor address; City; State; Zip Code 100 Congress Ave Ste 1710 Austin, TX 78701-2765	Amount of contribution (\$)  \$750.00	In-kind contribution description (if applicable)          <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  01/27/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Powers, Maureen  ..... Contributor address; City; State; Zip Code 3503 Hillbrook Cir Austin, TX 78731-4036	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)          <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  02/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ravella, Peter A.  ..... Contributor address; City; State; Zip Code 4107 Wildwood Rd Austin, TX 78722-1121	Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)          <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  02/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ray, Katherine  ..... Contributor address; City; State; Zip Code 518 Cliff Drive Austin, TX 78704	Amount of contribution (\$)  \$150.00	In-kind contribution description (if applicable) event expenses          <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
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: 48/62 Report: 51/95	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date  02/21/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Raymond, Virginia  6 Contributor address; City; State; Zip Code 3209 Hemlock Ave. Austin, TX 78722	7 Amount of contribution (\$)  \$120.00	8 In-kind contribution description (if applicable) event expenses   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  02/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reese, Pamela  Contributor address; City; State; Zip Code 3511 Westlake Dr Austin, TX 78746	Amount of contribution (\$)  \$500.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  02/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reid, Susan  Contributor address; City; State; Zip Code 1104 Wayside Dr Austin, TX 78703-3714	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  01/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reyes, Robert  Contributor address; City; State; Zip Code 3409 Trickling Springs Way Pflugerville, TX 78660-5544	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  01/31/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rich, Marvin  Contributor address; City; State; Zip Code 9607 Cedarhurst Dr Houston, TX 77096-4111	Amount of contribution (\$)  \$180.00	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: 49/62 Report: 52/95	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date  02/18/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Richards, David  6 Contributor address; City; State; Zip Code 816 Congress Ave. Ste. 1200 Austin, TX 78701	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date  02/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Richards, Hamilton  Contributor address; City; State; Zip Code 7102 Coachwhip Holw Austin, TX 78750-8202	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date  02/04/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Richey, Howie  Contributor address; City; State; Zip Code 6501 Linda Ln Austin, TX 78723-1930	Amount of contribution (\$)  \$35.00	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  02/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Richey, Howie  Contributor address; City; State; Zip Code 6501 Linda Ln Austin, TX 78723-1930	Amount of contribution (\$)  \$80.00	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  01/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Roberts, Susan  Contributor address; City; State; Zip Code 2312 Hartford Rd Austin, TX 78703-2437	Amount of contribution (\$)  \$35.00	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: 50/62 Report: 53/95	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date  02/10/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Roberts, Susan  6 Contributor address; City; State; Zip Code 2312 Hartford Rd Austin, TX 78703-2437	7 Amount of contribution (\$)  \$25.00	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  02/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rodgers, Brian  Contributor address; City; State; Zip Code 1112 W 9th St Austin, TX 78703-4926	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  02/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rogers, Gerhild  Contributor address; City; State; Zip Code 8100 Hillside Drive Austin, TX 78759	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  02/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rutishauser, Robert  Contributor address; City; State; Zip Code 4200 Jackson Ave Apt 5015 Austin, TX 78731-6061	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  02/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sack, Lester Jr.  Contributor address; City; State; Zip Code 5404 Western Hills Dr Austin, TX 78731-4824	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: 52/62 Report: 55/95	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date  02/13/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sauer, Lawrence  6 Contributor address; City; State; Zip Code 1004 West Ave Austin, TX 78701	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date  02/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Scanlan, Nancy  Contributor address; City; State; Zip Code 4513 Balcones Dr Austin, TX 78731-5219	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date  02/04/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Scheib, Relia  Contributor address; City; State; Zip Code 12401 Los Indios Trl Austin, TX 78729-7663	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date  01/27/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Schmidli, Lisette  Contributor address; City; State; Zip Code 3656 Ranch Creek Dr Austin, TX 78730-3701	Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date  02/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Scott, Marilyn  Contributor address; City; State; Zip Code 11512 Tin Cup Dr Apt 111 Austin, TX 78750-2621	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: 54/62 Report: 57/95	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date  01/28/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shapiro, Robert  6 Contributor address; City; State; Zip Code 42 Sundown Pkwy Austin, TX 78746-5258	7 Amount of contribution (\$)  \$500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  02/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shepherd, Suzanne  Contributor address; City; State; Zip Code 301 Briarwood Trl Austin, TX 78746-5410	Amount of contribution (\$)  \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  01/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sherzer, Dina  Contributor address; City; State; Zip Code 1453 Redbud Trl West Lake Hills, TX 78746-4342	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  02/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sherzer, Dina  Contributor address; City; State; Zip Code 1453 Redbud Trl West Lake Hills, TX 78746-4342	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  02/15/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shuart, Paula  Contributor address; City; State; Zip Code 6914 Dogwood Holw Austin, TX 78750-8213	Amount of contribution (\$)  \$200.00	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: 55/62 Report: 58/95	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date 02/18/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sims, Chula  6 Contributor address; City; State; Zip Code 803 Avondale Rd Austin, TX 78704	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 02/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Melissa  Contributor address; City; State; Zip Code 1410 Alameda Dr Austin, TX 78704-2511	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 02/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Sherry  Contributor address; City; State; Zip Code 2512 Wooldridge Dr Austin, TX 78703-2536	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 02/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith Traverso, Laura  Contributor address; City; State; Zip Code 700 Baylor St Austin, TX 78703-4934	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 01/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Speights, Sara  Contributor address; City; State; Zip Code 2701 W 49th 1/2 St Austin, TX 78731-5001	Amount of contribution (\$) \$75.00	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: 56/62 Report: 59/95	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date 02/10/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Spertus, Philip  6 Contributor address; City; State; Zip Code 5300 Bee Caves Rd Bldg 1 Ste 220 West Lake Hills, TX 78746-5226	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 01/31/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Spitzmiller, Olive  Contributor address; City; State; Zip Code 2415 Yupon St Houston, TX 77006-2515	Amount of contribution (\$) \$125.00	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 02/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stewart, Shannon  Contributor address; City; State; Zip Code 1603 Brackenridge St Austin, TX 78704-3511	Amount of contribution (\$) \$75.00	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 02/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stine, Mark  Contributor address; City; State; Zip Code 1403 W 10th St Austin, TX 78703	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 02/11/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stone, Keith  Contributor address; City; State; Zip Code 4716 John's Dr. Dallas, TX 75205	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"/>			

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 57/62 Report: 60/95	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date 02/21/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sutton, Patrick  6 Contributor address; City; State; Zip Code 1706 W 10th St Austin, TX 78703-3908	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 02/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) SW Liuna PAC  Contributor address; City; State; Zip Code 5555 N. Lamar Blvd. Ste. E121 Austin, TX 78751	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 02/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Swafford, Robert  Contributor address; City; State; Zip Code 2003 S Lamar Blvd Ste 8 Austin, TX 78704-3373	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 02/07/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sweets, Ellen  Contributor address; City; State; Zip Code 5300 Summer Dr Austin, TX 78741-3253	Amount of contribution (\$) \$260.00	In-kind contribution description (if applicable) Event expenses
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 02/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Torgimson, Peter & Carol  Contributor address; City; State; Zip Code 6104 Maury's Trail Austin, TX 78730	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)	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 58/62 Report: 61/95	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date  02/01/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Traverso, Daniel  6 Contributor address; City; State; Zip Code 700 Baylor St Austin, TX 78703-4934	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  02/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Trent, Betty  Contributor address; City; State; Zip Code 2822 Wooldridge Dr # A Austin, TX 78703-1956	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  01/29/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tuggle, Terry  Contributor address; City; State; Zip Code 2921 Jan Dr Pflugerville, TX 78660-7704	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  02/04/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tyree, Preston  Contributor address; City; State; Zip Code 10648 Floral Park Dr Austin, TX 78759-5104	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  02/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tyree, Preston  Contributor address; City; State; Zip Code 10648 Floral Park Dr Austin, TX 78759-5104	Amount of contribution (\$)  \$1,000.00	In-kind contribution description (if applicable)          (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The <b>INSTRUCTION GUIDE</b> explains how to complete this form.		<b>1</b> PAGE # Schedule: 59/62 Report: 62/95	
<b>2</b> FILER NAME Eckhardt, Sarah		<b>3</b> ACCOUNT # (Ethics Commission filers) 00000003	
<b>4</b> Date  02/01/2014	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Uribe, Hector  ..... <b>6</b> Contributor address; City; State; Zip Code 1105 Elm St Austin, TX 78703	<b>7</b> Amount of contribution (\$)  \$170.00	<b>8</b> In-kind contribution description (if applicable) Event expenses
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date  01/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Van Cleve, Judy  ..... Contributor address; City; State; Zip Code 502 Parkview Dr Pflugerville, TX 78660-2363	Amount of contribution (\$)  \$150.00	In-kind contribution description (if applicable) Event expenses
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date  01/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Van Cleve, Judy  ..... Contributor address; City; State; Zip Code 502 Parkview Dr Pflugerville, TX 78660-2363	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  02/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Verret, Eric  ..... Contributor address; City; State; Zip Code 5701 Chesterfield Avenue Austin, TX 78752	Amount of contribution (\$)  \$60.00	In-kind contribution description (if applicable) Event expenses
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date  02/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Walton, Cory  ..... Contributor address; City; State; Zip Code 1701 Bouldin Ave Austin, TX 78704	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: 60/62 Report: 63/95	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date 01/29/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Warner, M. Richard  6 Contributor address; City; State; Zip Code 14525 Hamilton Pool Rd Austin, TX 78738-7708	7 Amount of contribution (\$) \$1,000.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 02/19/2014	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 (\$) \$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 02/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Webb, Elizabeth  Contributor address; City; State; Zip Code 6138 Oliver Loving Trl Austin, TX 78749-1835	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 02/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Weber, Beth  Contributor address; City; State; Zip Code 8707 Bluff Springs Rd Apt A Austin, TX 78744	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 02/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Weddington, Ron  Contributor address; City; State; Zip Code 502 W 13th St Austin, TX 78701-1827	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"/>			

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 61/62 Report: 64/95	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date  02/17/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wendler, Ed  6 Contributor address; City; State; Zip Code 4803 Balcones Dr Austin, TX 78731	7 Amount of contribution (\$)  \$250.00	8 In-kind contribution description (if applicable)     (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  02/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Westervelt, Richard Jr.  Contributor address; City; State; Zip Code 5205 Scenic View Dr Austin, TX 78746-2240	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  02/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Whatley, Thomas  Contributor address; City; State; Zip Code 1916 W 40th St Austin, TX 78731	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  01/31/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Whiteside, Patricia  Contributor address; City; State; Zip Code 2307 Barton Hills Dr Austin, TX 78704-4501	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  01/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Windsor, Stephan  Contributor address; City; State; Zip Code 4101 N Hills Dr Austin, TX 78731-2825	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: 62/62 Report: 65/95	
2 FILER NAME Eckhardt, Sarah		3 ACCOUNT # (Ethics Commission filers) 00000003	
4 Date  01/24/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Winkler, Hugh  6 Contributor address; City; State; Zip Code 9510 Mor Dr Dripping Springs, TX 78620-2860	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  02/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wixson, S.  Contributor address; City; State; Zip Code 2108 Griswold Ln Austin, TX 78703-3010	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  02/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wolf, Joan  Contributor address; City; State; Zip Code 1102 E 8th St Austin, TX 78702-3225	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date  02/09/2014	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 (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date  02/21/2014	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 (\$)  \$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 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.

<b>1 PAGE #</b> Schedule: 1/30 Report: 66/95		<b>2 FILER NAME</b> Eckhardt, Sarah		<b>3 ACCOUNT # (TEC filers)</b> 00000003	
<b>4 Date</b> 01/27/2014	<b>5 Payee name</b> Adjavon, Tsoke				
<b>6 Amount (\$)</b> \$170.00	<b>7 Payee address City; State; Zip Code</b> 916 Rochester Castle Way Pflugerville, TX 78660				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category (See Categories listed at the top of this schedule)</b> Salaries/Wages/Contract Labor		<b>(b) Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Contract labor		
	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 02/03/2014	<b>Payee name</b> Adjavon, Tsoke				
<b>Amount (\$)</b> \$180.00	<b>Payee address City; State; Zip Code</b> 916 Rochester Castle Way Pflugerville, TX 78660				
<b>PURPOSE OF EXPENDITURE</b>	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		
	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 02/10/2014	<b>Payee name</b> Adjavon, Tsoke				
<b>Amount (\$)</b> \$190.00	<b>Payee address City; State; Zip Code</b> 916 Rochester Castle Way Pflugerville, TX 78660				
<b>PURPOSE OF EXPENDITURE</b>	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		
	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 02/17/2014	<b>Payee name</b> Adjavon, Tsoke				
<b>Amount (\$)</b> \$281.50	<b>Payee address City; State; Zip Code</b> 916 Rochester Castle Way Pflugerville, TX 78660				
<b>PURPOSE OF EXPENDITURE</b>	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		
	Candidate / Officeholder name		Office sought:	Office held:	

# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 2/30 Report: 67/95	<b>2 FILER NAME</b> Eckhardt, Sarah	<b>3 ACCOUNT # (TEC filers)</b> 00000003
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<b>4 Date</b> 02/10/2014	<b>5 Payee name</b> Austin Chronicle
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<b>6 Amount (\$)</b> \$1,345.00	<b>7 Payee address</b> City; State; Zip Code PO Box 49066 Austin, TX 78765
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<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Advertising Expense	<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Print political advertising
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<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name	Office sought:	Office held:
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<b>Date</b> 01/27/2014	<b>Payee name</b> Black, Justine
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<b>Amount (\$)</b> \$245.00	<b>Payee address</b> City; State; Zip Code 7801 Shoal Creek Blvd, Apt 224 Austin, TX 78757
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor
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<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name	Office sought:	Office held:
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<b>Date</b> 02/03/2014	<b>Payee name</b> Black, Justine
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<b>Amount (\$)</b> \$315.00	<b>Payee address</b> City; State; Zip Code 7801 Shoal Creek Blvd, Apt 224 Austin, TX 78757
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor
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<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name	Office sought:	Office held:
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<b>Date</b> 02/10/2014	<b>Payee name</b> Black, Justine
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<b>Amount (\$)</b> \$315.00	<b>Payee address</b> City; State; Zip Code 7801 Shoal Creek Blvd, Apt 224 Austin, TX 78757
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor
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<b>Complete ONLY if direct expenditure to benefit C/OH</b>	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.

<b>1 PAGE #</b> Schedule: 3/30 Report: 68/95		<b>2 FILER NAME</b> Eckhardt, Sarah		<b>3 ACCOUNT # (TEC filers)</b> 00000003	
<b>4 Date</b> 02/17/2014	<b>5 Payee name</b> Black, Justine				
<b>6 Amount (\$)</b> \$220.00	<b>7 Payee address City; State; Zip Code</b> 7801 Shoal Creek Blvd, Apt 224 Austin, TX 78757				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category (See Categories listed at the top of this schedule)</b> Salaries/Wages/Contract Labor		<b>(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/></b> Contract labor		
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 02/21/2014	<b>Payee name</b> Blue Roots Strategies, Inc				
<b>Amount (\$)</b> \$129.90	<b>Payee address City; State; Zip Code</b> PO Box 300053 Austin, TX 78703				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Advertising Expense		<b>Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/></b> Website maintenance		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 02/21/2014	<b>Payee name</b> Blue Roots Strategies, Inc				
<b>Amount (\$)</b> \$81.19	<b>Payee address City; State; Zip Code</b> PO Box 300053 Austin, TX 78703				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Advertising Expense		<b>Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/></b> Website maintenance		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 02/17/2014	<b>Payee name</b> Brandes, Isaac				
<b>Amount (\$)</b> \$130.00	<b>Payee address City; State; Zip Code</b> 1515 Wickersham Lane #734D Austin, TX 78741				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Salaries/Wages/Contract Labor		<b>Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/></b> Contract labor		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	

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

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 4/30 Report: 69/95		<b>2 FILER NAME</b> Eckhardt, Sarah		<b>3 ACCOUNT # (TEC filers)</b> 00000003	
<b>4 Date</b> 02/11/2014	<b>5 Payee name</b> Bueno Wireless				
<b>6 Amount (\$)</b> \$416.78	<b>7 Payee address</b> City; State; Zip Code 3112 Manor Rd. Austin, TX 78723				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category (See Categories listed at the top of this schedule)</b> Office Overhead/Rental Expense		<b>(b) Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Telephones		
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 02/21/2014	<b>Payee name</b> Bueno Wireless				
<b>Amount (\$)</b> \$119.00	<b>Payee address</b> City; State; Zip Code 3112 Manor Rd. Austin, TX 78723				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Office Overhead/Rental Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Telephones		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 01/27/2014	<b>Payee name</b> Burke, Cliff				
<b>Amount (\$)</b> \$96.00	<b>Payee address</b> City; State; Zip Code 13359 Pond Springs Road, Apt 714 Austin, TX 78729				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Salaries/Wages/Contract Labor		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> contract labor		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 02/03/2014	<b>Payee name</b> Burke, Cliff				
<b>Amount (\$)</b> \$170.00	<b>Payee address</b> City; State; Zip Code 13359 Pond Springs Road, Apt 714 Austin, TX 78729				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Salaries/Wages/Contract Labor		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> contract labor		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	

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

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 5/30 Report: 70/95		<b>2 FILER NAME</b> Eckhardt, Sarah		<b>3 ACCOUNT # (TEC filers)</b> 00000003	
<b>4 Date</b> 02/10/2014	<b>5 Payee name</b> Burke, Cliff				
<b>6 Amount (\$)</b> \$185.00	<b>7 Payee address City; State; Zip Code</b> 13359 Pond Springs Road, Apt 714 Austin, TX 78729				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category (See Categories listed at the top of this schedule)</b> Salaries/Wages/Contract Labor		<b>(b) Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> contract labor		
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 02/17/2014	<b>Payee name</b> Burke, Cliff				
<b>Amount (\$)</b> \$278.00	<b>Payee address City; State; Zip Code</b> 13359 Pond Springs Road, Apt 714 Austin, TX 78729				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Salaries/Wages/Contract Labor		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> contract labor		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 02/04/2014	<b>Payee name</b> Cervenka, Greg				
<b>Amount (\$)</b> \$966.00	<b>Payee address City; State; Zip Code</b> PO BOX 161150 Austin, TX 78716				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Office Overhead/Rental Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Office rent		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 01/24/2014	<b>Payee name</b> Cricket Wireless				
<b>Amount (\$)</b> \$169.93	<b>Payee address City; State; Zip Code</b> 5905 Burnet Austin, TX 78751				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Office Overhead/Rental Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Telephone service		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	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.

<b>1 PAGE #</b> Schedule: 6/30 Report: 71/95		<b>2 FILER NAME</b> Eckhardt, Sarah		<b>3 ACCOUNT # (TEC filers)</b> 00000003	
<b>4 Date</b> 02/21/2014		<b>5 Payee name</b> Delgado, Bertha			
<b>6 Amount (\$)</b> \$750.00		<b>7 Payee address City; State; Zip Code</b> 2008 Haskell St. Austin, TX 78702			
<b>8 PURPOSE OF EXPENDITURE</b>		<b>(a) Category (See Categories listed at the top of this schedule)</b> Event Expense		<b>(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/></b> Event set-up, food and drinks for volunteers	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 01/24/2014		<b>Payee name</b> Facebook, Inc.			
<b>Amount (\$)</b> \$31.24		<b>Payee address City; State; Zip Code</b> 1601 Willow Road Menlo Park, CA 94025			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category (See Categories listed at the top of this schedule)</b> Advertising Expense		<b>Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/></b> Online political advertising	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 01/27/2014		<b>Payee name</b> Facebook, Inc.			
<b>Amount (\$)</b> \$30.00		<b>Payee address City; State; Zip Code</b> 1601 Willow Road Menlo Park, CA 94025			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category (See Categories listed at the top of this schedule)</b> Advertising Expense		<b>Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/></b> Online political advertising	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 01/30/2014		<b>Payee name</b> Facebook, Inc.			
<b>Amount (\$)</b> \$30.00		<b>Payee address City; State; Zip Code</b> 1601 Willow Road Menlo Park, CA 94025			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category (See Categories listed at the top of this schedule)</b> Advertising Expense		<b>Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/></b> Online political advertising	
Complete <b>ONLY</b> 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.

<b>1 PAGE #</b> Schedule: 7/30 Report: 72/95		<b>2 FILER NAME</b> Eckhardt, Sarah		<b>3 ACCOUNT # (TEC filers)</b> 00000003	
<b>4 Date</b> 02/03/2014		<b>5 Payee name</b> Facebook, Inc.			
<b>6 Amount (\$)</b> \$30.00		<b>7 Payee address</b> City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025			
<b>8 PURPOSE OF EXPENDITURE</b>		<b>(a) Category</b> (See Categories listed at the top of this schedule) Advertising Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Online political advertising	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 02/05/2014		<b>Payee name</b> Facebook, Inc.			
<b>Amount (\$)</b> \$30.00		<b>Payee address</b> City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) Advertising Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Online political advertising	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 02/10/2014		<b>Payee name</b> Facebook, Inc.			
<b>Amount (\$)</b> \$29.90		<b>Payee address</b> City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) Advertising Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Online political advertising	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 02/10/2014		<b>Payee name</b> Facebook, Inc.			
<b>Amount (\$)</b> \$27.10		<b>Payee address</b> City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) Advertising Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Online political advertising	
Complete <b>ONLY</b> 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.

<b>1</b> PAGE # Schedule: 8/30 Report: 73/95	<b>2</b> FILER NAME Eckhardt, Sarah	<b>3</b> ACCOUNT # (TEC filers) 00000003
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<b>4</b> Date 02/13/2014	<b>5</b> Payee name Facebook, Inc.
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<b>6</b> Amount (\$) \$32.51	<b>7</b> Payee address City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Online political advertising
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 02/14/2014	Payee name Facebook, Inc.
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Amount (\$) \$6.61	Payee address City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Online political 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 02/18/2014	Payee name Facebook, Inc.
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Amount (\$) \$30.00	Payee address City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Online political 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 02/19/2014	Payee name Facebook, Inc.
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Amount (\$) \$30.00	Payee address City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Online political 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.

<b>1 PAGE #</b> Schedule: 9/30 Report: 74/95		<b>2 FILER NAME</b> Eckhardt, Sarah		<b>3 ACCOUNT # (TEC filers)</b> 00000003	
<b>4 Date</b> 02/21/2014	<b>5 Payee name</b> Facebook, Inc.				
<b>6 Amount (\$)</b> \$25.47	<b>7 Payee address</b> City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Advertising Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Online political advertising		
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 02/03/2014	<b>Payee name</b> First Data Merchant Services				
<b>Amount (\$)</b> \$109.05	<b>Payee address</b> City; State; Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342				
<b>PURPOSE OF EXPENDITURE</b>	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		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 02/03/2014	<b>Payee name</b> First Data Merchant Services				
<b>Amount (\$)</b> \$541.43	<b>Payee address</b> City; State; Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342				
<b>PURPOSE OF EXPENDITURE</b>	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		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 02/03/2014	<b>Payee name</b> First Data Merchant Services				
<b>Amount (\$)</b> \$652.65	<b>Payee address</b> City; State; Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342				
<b>PURPOSE OF EXPENDITURE</b>	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		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:

# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 10/30 Report: 75/95		<b>2 FILER NAME</b> Eckhardt, Sarah		<b>3 ACCOUNT # (TEC filers)</b> 00000003	
<b>4 Date</b> 02/18/2014		<b>5 Payee name</b> First Data Merchant Services			
<b>6 Amount (\$)</b> \$5.16		<b>7 Payee address City; State; Zip Code</b> 5565 Glenridge Connector NE Atlanta, GA 30342			
<b>8 PURPOSE OF EXPENDITURE</b>		<b>(a) Category (See Categories listed at the top of this schedule)</b> Accounting/Banking		<b>(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/></b> merchant account fees	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 01/30/2014		<b>Payee name</b> Gilliam, Thomas			
<b>Amount (\$)</b> \$925.00		<b>Payee address City; State; Zip Code</b> 2505 Village Trail Circle Austin, TX 78744			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category (See Categories listed at the top of this schedule)</b> Salaries/Wages/Contract Labor		<b>Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/></b> Contract labor	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 02/14/2014		<b>Payee name</b> Gilliam, Tom			
<b>Amount (\$)</b> \$925.00		<b>Payee address City; State; Zip Code</b> 2505 Village Trail Circle Austin, TX 78744			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category (See Categories listed at the top of this schedule)</b> Salaries/Wages/Contract Labor		<b>Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/></b> Contract labor	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 01/24/2014		<b>Payee name</b> Goss, Delwin			
<b>Amount (\$)</b> \$3,240.00		<b>Payee address City; State; Zip Code</b> 6410 Ponca Street Austin, TX 78741			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category (See Categories listed at the top of this schedule)</b> Salaries/Wages/Contract Labor		<b>Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/></b> contract labor / yard sign placement	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

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

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 11/30 Report: 76/95		<b>2</b> FILER NAME Eckhardt, Sarah		<b>3</b> ACCOUNT # (TEC filers) 00000003	
<b>4</b> Date 01/31/2014	<b>5</b> Payee name Goss, Delwin				
<b>6</b> Amount (\$) \$540.00	<b>7</b> Payee address City; State; Zip Code 6410 Ponca Street Austin, TX 78741				
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> contract labor / yard sign placement		
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 02/10/2014	Payee name Grande Communications				
Amount (\$) \$112.66	Payee address City; State; Zip Code 1923 E 7th St #100 Austin, TX 78702				
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"/> Internet		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 01/31/2014	Payee name Hudson, Nick				
Amount (\$) \$3,500.00	Payee address City; State; Zip Code 12113 Metric Blvd. #1037 Austin, TX 78758				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Manager salary		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 01/28/2014	Payee name Jeff Crosby Direct Mail				
Amount (\$) \$13,535.00	Payee address City; State; Zip Code 902 E. 5th St., Ste. 103 Austin, TX 78702				
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"/> design, printing and postage		
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.

<b>1 PAGE #</b> Schedule: 12/30 Report: 77/95		<b>2 FILER NAME</b> Eckhardt, Sarah		<b>3 ACCOUNT # (TEC filers)</b> 00000003	
<b>4 Date</b> 02/03/2014	<b>5 Payee name</b> Jeff Crosby Direct Mail				
<b>6 Amount (\$)</b> \$7,646.00	<b>7 Payee address City; State; Zip Code</b> 902 E. 5th St., Ste. 103 Austin, TX 78702				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category (See Categories listed at the top of this schedule)</b> Advertising Expense		<b>(b) Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> design, printing and postage		
	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 02/04/2014	<b>Payee name</b> Jeff Crosby Direct Mail				
<b>Amount (\$)</b> \$2,264.00	<b>Payee address City; State; Zip Code</b> 902 E. 5th St., Ste. 103 Austin, TX 78702				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Advertising Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> design & printing		
	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 02/11/2014	<b>Payee name</b> Jeff Crosby Direct Mail				
<b>Amount (\$)</b> \$12,839.00	<b>Payee address City; State; Zip Code</b> 902 E. 5th St., Ste. 103 Austin, TX 78702				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Printing Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> design, printing and postage		
	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 02/18/2014	<b>Payee name</b> Jeff Crosby Direct Mail				
<b>Amount (\$)</b> \$12,839.00	<b>Payee address City; State; Zip Code</b> 902 E. 5th St., Ste. 103 Austin, TX 78702				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Printing Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> design, printing and postage		
	Candidate / Officeholder name		Office sought:	Office held:	

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

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 13/30 Report: 78/95		<b>2 FILER NAME</b> Eckhardt, Sarah		<b>3 ACCOUNT # (TEC filers)</b> 00000003	
<b>4 Date</b> 02/19/2014	<b>5 Payee name</b> Jeff Crosby Direct Mail				
<b>6 Amount (\$)</b> \$13,690.00	<b>7 Payee address City; State; Zip Code</b> 902 E. 5th St., Ste. 103 Austin, TX 78702				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category (See Categories listed at the top of this schedule)</b> Printing Expense		<b>(b) Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> design, printing and postage		
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 02/21/2014	<b>Payee name</b> Jeff Crosby Direct Mail				
<b>Amount (\$)</b> \$3,256.00	<b>Payee address City; State; Zip Code</b> 902 E. 5th St., Ste. 103 Austin, TX 78702				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Printing Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Printing		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 02/21/2014	<b>Payee name</b> Jeff Crosby Direct Mail				
<b>Amount (\$)</b> \$10,799.00	<b>Payee address City; State; Zip Code</b> 902 E. 5th St., Ste. 103 Austin, TX 78702				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Printing Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> design, printing and postage		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 02/22/2014	<b>Payee name</b> Juan in a Million				
<b>Amount (\$)</b> \$134.00	<b>Payee address City; State; Zip Code</b> 2300 E Cesar Chavez St. Austin, TX 78702				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Food/Beverage Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> food for volunteers		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	

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

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 14/30 Report: 79/95		<b>2 FILER NAME</b> Eckhardt, Sarah		<b>3 ACCOUNT # (TEC filers)</b> 00000003	
<b>4 Date</b> 02/18/2014	<b>5 Payee name</b> Kelly Graphics				
<b>6 Amount (\$)</b> \$10,494.73	<b>7 Payee address City; State; Zip Code</b> 1409 Quaker Ridge Austin, TX 78746				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category (See Categories listed at the top of this schedule)</b> Advertising Expense		<b>(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/></b> Printing and mailing services		
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 02/22/2014	<b>Payee name</b> Kinko's Fed Ex				
<b>Amount (\$)</b> \$200.00	<b>Payee address City; State; Zip Code</b> 9222 Burnet Rd. Austin, TX 78758				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Printing Expense		<b>Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/></b> copies		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 01/27/2014	<b>Payee name</b> LaFave, Daniel				
<b>Amount (\$)</b> \$260.00	<b>Payee address City; State; Zip Code</b> 1515 Wickersham #226-C Austin, TX 78741				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Salaries/Wages/Contract Labor		<b>Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/></b> Contract labor		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 02/03/2014	<b>Payee name</b> LaFave, Daniel				
<b>Amount (\$)</b> \$375.00	<b>Payee address City; State; Zip Code</b> 1515 Wickersham #226-C Austin, TX 78741				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Salaries/Wages/Contract Labor		<b>Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/></b> Contract labor		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	

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

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 15/30 Report: 80/95		<b>2 FILER NAME</b> Eckhardt, Sarah		<b>3 ACCOUNT # (TEC filers)</b> 00000003	
<b>4 Date</b> 02/10/2014		<b>5 Payee name</b> LaFave, Daniel			
<b>6 Amount (\$)</b> \$360.00		<b>7 Payee address</b> City; State; Zip Code 1515 Wickersham #226-C Austin, TX 78741			
<b>8 PURPOSE OF EXPENDITURE</b>		<b>(a) Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 02/17/2014		<b>Payee name</b> LaFave, Daniel			
<b>Amount (\$)</b> \$525.00		<b>Payee address</b> City; State; Zip Code 1515 Wickersham #226-C Austin, TX 78741			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 02/17/2014		<b>Payee name</b> Montelongo, Art			
<b>Amount (\$)</b> \$191.50		<b>Payee address</b> City; State; Zip Code 625 E. Stassney Lane #5204 Austin, TX 78745			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 02/03/2014		<b>Payee name</b> Newton, Scott			
<b>Amount (\$)</b> \$216.50		<b>Payee address</b> City; State; Zip Code 3012 Oak Crest Ave. Austin, TX 78704			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) Event Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Videographer	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

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

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 16/30 Report: 81/95		<b>2 FILER NAME</b> Eckhardt, Sarah		<b>3 ACCOUNT # (TEC filers)</b> 00000003	
<b>4 Date</b> 02/03/2014		<b>5 Payee name</b> Newton, Scott			
<b>6 Amount (\$)</b> \$216.50		<b>7 Payee address</b> City; State; Zip Code 3012 Oak Crest Ave. Austin, TX 78704			
<b>8 PURPOSE OF EXPENDITURE</b>		<b>(a) Category</b> (See Categories listed at the top of this schedule) Event Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Videographer	
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought:	Office held:
<b>Date</b> 02/03/2014		<b>Payee name</b> NGP VAN			
<b>Amount (\$)</b> \$350.00		<b>Payee address</b> City; State; Zip Code 1105 15th Street NW, Ste. 500 Washington, DC 20005			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> database software	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought:	Office held:
<b>Date</b> 01/27/2014		<b>Payee name</b> Nunez, Alyssa			
<b>Amount (\$)</b> \$295.00		<b>Payee address</b> City; State; Zip Code 53 Riverbend Dr. San Marcos, TX 78666			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought:	Office held:
<b>Date</b> 02/03/2014		<b>Payee name</b> Nunez, Alyssa			
<b>Amount (\$)</b> \$270.00		<b>Payee address</b> City; State; Zip Code 53 Riverbend Dr. San Marcos, TX 78666			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought:	Office held:

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

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 17/30 Report: 82/95		<b>2</b> FILER NAME Eckhardt, Sarah		<b>3</b> ACCOUNT # (TEC filers) 00000003	
<b>4</b> Date 02/10/2014		<b>5</b> Payee name Nunez, Alyssa			
<b>6</b> Amount (\$) \$270.00		<b>7</b> Payee address City; State; Zip Code 53 Riverbend Dr. San Marcos, TX 78666			
<b>8</b> 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 <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 02/17/2014		Payee name Nunez, Alyssa			
Amount (\$) \$180.00		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 <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 01/29/2014		Payee name Office Depot			
Amount (\$) \$329.05		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 <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 02/08/2014		Payee name Office Depot			
Amount (\$) \$32.42		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 <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 18/30 Report: 83/95	<b>2 FILER NAME</b> Eckhardt, Sarah	<b>3 ACCOUNT # (TEC filers)</b> 00000003
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<b>4 Date</b> 02/10/2014	<b>5 Payee name</b> Office Depot
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<b>6 Amount (\$)</b> \$314.98	<b>7 Payee address City; State; Zip Code</b> 4501 West Braker Lane Austin, TX 78759
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<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category (See Categories listed at the top of this schedule)</b> Office Overhead/Rental Expense	<b>(b) Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> office supplies
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<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name	Office sought:	Office held:
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<b>Date</b> 02/19/2014	<b>Payee name</b> Office Depot
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<b>Amount (\$)</b> \$14.06	<b>Payee address City; State; Zip Code</b> 4501 West Braker Lane Austin, TX 78759
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Office Overhead/Rental Expense	<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> office supplies
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<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name	Office sought:	Office held:
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<b>Date</b> 02/21/2014	<b>Payee name</b> Office Depot
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<b>Amount (\$)</b> \$221.90	<b>Payee address City; State; Zip Code</b> 4501 West Braker Lane Austin, TX 78759
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Office Overhead/Rental Expense	<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> office supplies
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<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name	Office sought:	Office held:
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<b>Date</b> 02/22/2014	<b>Payee name</b> Office Depot
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<b>Amount (\$)</b> \$221.90	<b>Payee address City; State; Zip Code</b> 4501 West Braker Lane Austin, TX 78759
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Office Overhead/Rental Expense	<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> office supplies
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<b>Complete ONLY if direct expenditure to benefit C/OH</b>	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.

<b>1</b> PAGE # Schedule: 19/30 Report: 84/95		<b>2</b> FILER NAME Eckhardt, Sarah		<b>3</b> ACCOUNT # (TEC filers) 00000003	
<b>4</b> Date 02/22/2014		<b>5</b> Payee name Office Depot			
<b>6</b> Amount (\$) \$116.86		<b>7</b> Payee address City; State; Zip Code 4501 West Braker Lane Austin, TX 78759			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> office supplies	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 02/10/2014		Payee name Opp, Kevin			
Amount (\$) \$252.00		Payee address City; State; Zip Code 2700 Carnarvon Lane Austin, TX 78704			
<b>8</b> 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 <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 02/17/2014		Payee name Opp, Kevin			
Amount (\$) \$275.00		Payee address City; State; Zip Code 2700 Carnarvon Lane Austin, TX 78704			
<b>8</b> 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 <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 02/14/2014		Payee name Peter A. Ravella Consulting			
Amount (\$) \$5,000.00		Payee address City; State; Zip Code 4107 Wildwood Rd. Austin, TX 78722			
<b>8</b> 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 <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 20/30 Report: 85/95		<b>2 FILER NAME</b> Eckhardt, Sarah		<b>3 ACCOUNT # (TEC filers)</b> 00000003	
<b>4 Date</b> 02/12/2014	<b>5 Payee name</b> Phoneburner				
<b>6 Amount (\$)</b> \$149.00	<b>7 Payee address City; State; Zip Code</b> 27702 Crown Valley Parkway Ladera Ranch, CA 92694				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category (See Categories listed at the top of this schedule)</b> Solicitation/Fundraising Expense			<b>(b) Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Software	
	Candidate / Officeholder name			Office sought:	Office held:
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>					
<b>Date</b> 02/21/2014	<b>Payee name</b> Phoneburner				
<b>Amount (\$)</b> \$3.00	<b>Payee address City; State; Zip Code</b> 27702 Crown Valley Parkway Ladera Ranch, CA 92694				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Solicitation/Fundraising Expense			<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Software	
	Candidate / Officeholder name			Office sought:	Office held:
<b>Complete ONLY if direct expenditure to benefit C/OH</b>					
<b>Date</b> 01/29/2014	<b>Payee name</b> Postmaster				
<b>Amount (\$)</b> \$19.60	<b>Payee address City; State; Zip Code</b> 3507 N. Lamar Blvd. Austin, TX 78705-9997				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Printing Expense			<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> postage	
	Candidate / Officeholder name			Office sought:	Office held:
<b>Complete ONLY if direct expenditure to benefit C/OH</b>					
<b>Date</b> 02/11/2014	<b>Payee name</b> Postmaster				
<b>Amount (\$)</b> \$147.00	<b>Payee address City; State; Zip Code</b> 3507 N. Lamar Blvd. Austin, TX 78705-9997				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Printing Expense			<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> postage	
	Candidate / Officeholder name			Office sought:	Office held:
<b>Complete ONLY if direct expenditure to benefit C/OH</b>					

# 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.

<b>1 PAGE #</b> Schedule: 21/30 Report: 86/95		<b>2 FILER NAME</b> Eckhardt, Sarah		<b>3 ACCOUNT # (TEC filers)</b> 00000003	
<b>4 Date</b> 01/24/2014		<b>5 Payee name</b> Premiere Political Communications			
<b>6 Amount (\$)</b> \$497.75		<b>7 Payee address City; State; Zip Code</b> 4805 Woodview Ave. Austin, TX 78756			
<b>8 PURPOSE OF EXPENDITURE</b>		<b>(a) Category (See Categories listed at the top of this schedule)</b> Polling Expense		<b>(b) Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Telephone calls	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 02/14/2014		<b>Payee name</b> Premiere Political Communications			
<b>Amount (\$)</b> \$373.60		<b>Payee address City; State; Zip Code</b> 4805 Woodview Ave. Austin, TX 78756			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category (See Categories listed at the top of this schedule)</b> Advertising Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Telephone calls	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 01/27/2014		<b>Payee name</b> Prieto, Rene			
<b>Amount (\$)</b> \$245.00		<b>Payee address City; State; Zip Code</b> 2505 Villiage Trail Circle Austin, TX 78744			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category (See Categories listed at the top of this schedule)</b> Salaries/Wages/Contract Labor		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Contract labor	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 02/03/2014		<b>Payee name</b> Prieto, Rene			
<b>Amount (\$)</b> \$210.00		<b>Payee address City; State; Zip Code</b> 2505 Villiage Trail Circle Austin, TX 78744			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category (See Categories listed at the top of this schedule)</b> Salaries/Wages/Contract Labor		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Contract labor	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 22/30 Report: 87/95		<b>2 FILER NAME</b> Eckhardt, Sarah		<b>3 ACCOUNT # (TEC filers)</b> 00000003	
<b>4 Date</b> 02/10/2014		<b>5 Payee name</b> Prieto, Rene			
<b>6 Amount (\$)</b> \$280.00		<b>7 Payee address City; State; Zip Code</b> 2505 Villiage Trail Circle Austin, TX 78744			
<b>8 PURPOSE OF EXPENDITURE</b>		<b>(a) Category (See Categories listed at the top of this schedule)</b> Salaries/Wages/Contract Labor		<b>(b) Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Contract labor	
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought:	Office held:
<b>Date</b> 02/17/2014		<b>Payee name</b> Prieto, Rene			
<b>Amount (\$)</b> \$277.50		<b>Payee address City; State; Zip Code</b> 2505 Villiage Trail Circle Austin, TX 78744			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category (See Categories listed at the top of this schedule)</b> Salaries/Wages/Contract Labor		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Contract labor	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought:	Office held:
<b>Date</b> 01/27/2014		<b>Payee name</b> Pritchard, Casey			
<b>Amount (\$)</b> \$170.00		<b>Payee address City; State; Zip Code</b> 7117 Woodhollow Dr. #480 Austin, TX 78731			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category (See Categories listed at the top of this schedule)</b> Salaries/Wages/Contract Labor		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Contract labor	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought:	Office held:
<b>Date</b> 02/03/2014		<b>Payee name</b> Pritchard, Casey			
<b>Amount (\$)</b> \$225.00		<b>Payee address City; State; Zip Code</b> 7117 Woodhollow Dr. #480 Austin, TX 78731			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category (See Categories listed at the top of this schedule)</b> Salaries/Wages/Contract Labor		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Contract labor	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought:	Office held:

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

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 23/30 Report: 88/95		<b>2 FILER NAME</b> Eckhardt, Sarah		<b>3 ACCOUNT # (TEC filers)</b> 00000003	
<b>4 Date</b> 02/10/2014	<b>5 Payee name</b> Pritchard, Casey				
<b>6 Amount (\$)</b> \$256.66	<b>7 Payee address City; State; Zip Code</b> 7117 Woodhollow Dr. #480 Austin, TX 78731				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category (See Categories listed at the top of this schedule)</b> Salaries/Wages/Contract Labor		<b>(b) Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Contract labor		
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 02/17/2014	<b>Payee name</b> Pritchard, Casey				
<b>Amount (\$)</b> \$262.50	<b>Payee address City; State; Zip Code</b> 7117 Woodhollow Dr. #480 Austin, TX 78731				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Salaries/Wages/Contract Labor		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Contract labor		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 02/21/2014	<b>Payee name</b> RRT & Company				
<b>Amount (\$)</b> \$20,000.00	<b>Payee address City; State; Zip Code</b> P.O. Box 251753 Little Rock, AR 72201				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Advertising Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Television political advertising		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 02/17/2014	<b>Payee name</b> Sabatucci, Monica				
<b>Amount (\$)</b> \$206.60	<b>Payee address City; State; Zip Code</b> 1109 S. Pleasant Valley Rd. #610 Austin, TX 78741				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Salaries/Wages/Contract Labor		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Contract labor		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	

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

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 24/30 Report: 89/95		<b>2 FILER NAME</b> Eckhardt, Sarah		<b>3 ACCOUNT # (TEC filers)</b> 00000003	
<b>4 Date</b> 01/27/2014	<b>5 Payee name</b> Sabogal, Hector				
<b>6 Amount (\$)</b> \$90.00	<b>7 Payee address City; State; Zip Code</b> 2803 Hemphill Park, Apt #6110 Austin, TX 78705				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category (See Categories listed at the top of this schedule)</b> Salaries/Wages/Contract Labor		<b>(b) Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Contract labor		
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 02/03/2014	<b>Payee name</b> Sabogal, Hector				
<b>Amount (\$)</b> \$300.00	<b>Payee address City; State; Zip Code</b> 2803 Hemphill Park, Apt #6110 Austin, TX 78705				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Salaries/Wages/Contract Labor		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Contract labor		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 02/10/2014	<b>Payee name</b> Sabogal, Hector				
<b>Amount (\$)</b> \$240.00	<b>Payee address City; State; Zip Code</b> 2803 Hemphill Park, Apt #6110 Austin, TX 78705				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Salaries/Wages/Contract Labor		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Contract labor		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 02/17/2014	<b>Payee name</b> Sabogal, Hector				
<b>Amount (\$)</b> \$225.00	<b>Payee address City; State; Zip Code</b> 2803 Hemphill Park, Apt #6110 Austin, TX 78705				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Salaries/Wages/Contract Labor		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Contract labor		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 25/30 Report: 90/95		<b>2 FILER NAME</b> Eckhardt, Sarah		<b>3 ACCOUNT # (TEC filers)</b> 00000003	
<b>4 Date</b> 01/27/2014		<b>5 Payee name</b> San Luis, Natalie			
<b>6 Amount (\$)</b> \$100.00		<b>7 Payee address</b> City; State; Zip Code 3000 University Ave. Austin, TX 78705			
<b>8 PURPOSE OF EXPENDITURE</b>		<b>(a) Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 02/10/2014		<b>Payee name</b> San Luis, Natalie			
<b>Amount (\$)</b> \$100.00		<b>Payee address</b> City; State; Zip Code 3000 University Ave. Austin, TX 78705			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 01/31/2014		<b>Payee name</b> Shea, Caitlin			
<b>Amount (\$)</b> \$1,250.00		<b>Payee address</b> City; State; Zip Code 12223 Tyson Cv #B Austin, TX 78758			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Field Director salary	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 02/18/2014		<b>Payee name</b> Shea, Caitlin			
<b>Amount (\$)</b> \$1,250.00		<b>Payee address</b> City; State; Zip Code 12223 Tyson Cv #B Austin, TX 78758			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Field Director salary	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 26/30 Report: 91/95		<b>2 FILER NAME</b> Eckhardt, Sarah		<b>3 ACCOUNT # (TEC filers)</b> 00000003	
<b>4 Date</b> 01/27/2014	<b>5 Payee name</b> Spears, Eric				
<b>6 Amount (\$)</b> \$225.00	<b>7 Payee address</b> City; State; Zip Code 3213 Centrum Dr. Austin, TX 78754				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor		
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 02/03/2014	<b>Payee name</b> Spears, Eric				
<b>Amount (\$)</b> \$395.00	<b>Payee address</b> City; State; Zip Code 3213 Centrum Dr. Austin, TX 78754				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 02/10/2014	<b>Payee name</b> Spears, Eric				
<b>Amount (\$)</b> \$285.00	<b>Payee address</b> City; State; Zip Code 3213 Centrum Dr. Austin, TX 78754				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 02/17/2014	<b>Payee name</b> Spears, Eric				
<b>Amount (\$)</b> \$455.00	<b>Payee address</b> City; State; Zip Code 3213 Centrum Dr. Austin, TX 78754				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 27/30 Report: 92/95		<b>2</b> FILER NAME Eckhardt, Sarah		<b>3</b> ACCOUNT # (TEC filers) 00000003	
<b>4</b> Date 01/31/2014		<b>5</b> Payee name Staples			
<b>6</b> Amount (\$) \$10.60		<b>7</b> Payee address City; State; Zip Code 1201 Barbara Jordan Blvd. Austin, TX 78723			
<b>8</b> 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	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 01/31/2014		Payee name Staples			
Amount (\$) \$41.58		Payee address City; State; Zip Code 1201 Barbara Jordan Blvd. Austin, TX 78723			
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 <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 02/03/2014		Payee name Staples			
Amount (\$) \$25.96		Payee address City; State; Zip Code 1201 Barbara Jordan Blvd. Austin, TX 78723			
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 <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 02/05/2014		Payee name Staples			
Amount (\$) \$35.84		Payee address City; State; Zip Code 1201 Barbara Jordan Blvd. Austin, TX 78723			
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 <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

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

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 28/30 Report: 93/95		<b>2 FILER NAME</b> Eckhardt, Sarah		<b>3 ACCOUNT # (TEC filers)</b> 00000003	
<b>4 Date</b> 02/05/2014	<b>5 Payee name</b> Staples				
<b>6 Amount (\$)</b> \$134.15	<b>7 Payee address City; State; Zip Code</b> 1201 Barbara Jordan Blvd. Austin, TX 78723				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category (See Categories listed at the top of this schedule)</b> Office Overhead/Rental Expense		<b>(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/></b> office supplies		
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 02/14/2014	<b>Payee name</b> Staples				
<b>Amount (\$)</b> \$308.74	<b>Payee address City; State; Zip Code</b> 1201 Barbara Jordan Blvd. Austin, TX 78723				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Office Overhead/Rental Expense		<b>Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/></b> office supplies		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 02/14/2014	<b>Payee name</b> Staples				
<b>Amount (\$)</b> \$10.77	<b>Payee address City; State; Zip Code</b> 1201 Barbara Jordan Blvd. Austin, TX 78723				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Office Overhead/Rental Expense		<b>Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/></b> office supplies		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 02/18/2014	<b>Payee name</b> Staples				
<b>Amount (\$)</b> \$286.09	<b>Payee address City; State; Zip Code</b> 1201 Barbara Jordan Blvd. Austin, TX 78723				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Office Overhead/Rental Expense		<b>Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/></b> office supplies		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	

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

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 29/30 Report: 94/95		<b>2</b> FILER NAME Eckhardt, Sarah		<b>3</b> ACCOUNT # (TEC filers) 00000003	
<b>4</b> Date 02/21/2014		<b>5</b> Payee name Staples			
<b>6</b> Amount (\$) \$36.88		<b>7</b> Payee address City; State; Zip Code 1201 Barbara Jordan Blvd. Austin, TX 78723			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		<b>(b)</b> 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 02/22/2014		Payee name Staples			
Amount (\$) \$47.62		Payee address City; State; Zip Code 1201 Barbara Jordan Blvd. Austin, TX 78723			
<b>8</b> 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 02/22/2014		Payee name Staples			
Amount (\$) \$36.88		Payee address City; State; Zip Code 1201 Barbara Jordan Blvd. Austin, TX 78723			
<b>8</b> 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 02/01/2014		Payee name Susan Harry Consulting			
Amount (\$) \$3,250.00		Payee address City; State; Zip Code P.O. Box 301074 Austin, TX 78703			
<b>8</b> 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	
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 Expense	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.**

<b>1 PAGE #</b> Schedule: 30/30 Report: 95/95		<b>2 FILER NAME</b> Eckhardt, Sarah		<b>3 ACCOUNT # (TEC filers)</b> 00000003	
<b>4 Date</b> 01/27/2014	<b>5 Payee name</b> USPS				
<b>6 Amount (\$)</b> \$165.00	<b>7 Payee address City; State; Zip Code</b> 3507 N LAMAR BLVD Austin, TX 78705				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category (See Categories listed at the top of this schedule)</b> Printing Expense		<b>(b) Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> postage		
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 02/17/2014	<b>Payee name</b> Vasquez, Pablo				
<b>Amount (\$)</b> \$250.00	<b>Payee address City; State; Zip Code</b> 2906 E. MLK Jr. Blvd. #2214 Austin, TX 78702				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Salaries/Wages/Contract Labor		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Contract labor		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 02/17/2014	<b>Payee name</b> Vega, Adolph				
<b>Amount (\$)</b> \$315.00	<b>Payee address City; State; Zip Code</b> 12443 Tech Ridge Blvd. #1113 Austin, TX 78753				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Salaries/Wages/Contract Labor		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Contract labor		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 01/31/2014	<b>Payee name</b> Whole Foods				
<b>Amount (\$)</b> \$164.00	<b>Payee address City; State; Zip Code</b> 701 Waugh Dr Houston, TX 77019				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Event Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Food and beverages for event		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	