

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

14 C/OH NAME
Sally I. Hernandez

15 ACCOUNT # (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

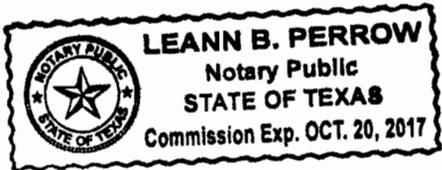
THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

additional pages

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

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 1,050.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 7,750.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 263.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 649.35
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 7,109.58
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ -0-

18 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.

Sally I. Hernandez
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Sally I. Hernandez, this the 14th day of July, 2014, to certify which, witness my hand and seal of office.

LeAnn B. Perrow LeAnn B. Perrow NOTARY PUBLIC
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

1 of 6

2 FILER NAME

Sally I. Hernandez

3 ACCOUNT # (Ethics Commission Filers)

4 Date

3/22/14

5 Full name of contributor out-of-state PAC (ID#: _____)

Milton Washington

6 Contributor address; City; State; Zip Code

11500 Oak Trl Austin 78753

7 Amount of contribution (\$)
100.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

4/8/14

Full name of contributor out-of-state PAC (ID#: _____)

Elizabeth Yevich

Contributor address; City; State; Zip Code

2105B Arbor Ave. Austin 78704

Amount of contribution (\$)
100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/15/14

Full name of contributor out-of-state PAC (ID#: _____)

Anthony & Kellye Johnson

Contributor address; City; State; Zip Code

Amount of contribution (\$)
150.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/15/14

Full name of contributor out-of-state PAC (ID#: _____)

Xavier & Cher Montalvo

Contributor address; City; State; Zip Code

7501 Vol Walker Dr. Austin 78749

Amount of contribution (\$)
150.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/16/14

Full name of contributor out-of-state PAC (ID#: _____)

Chris Dorbandt

Contributor address; City; State; Zip Code

603 W. 12th Austin 78701

Amount of contribution (\$)
250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: **2 of 6**

2 FILER NAME **Sally I. Hernandez**

3 ACCOUNT # (Ethics Commission Filers)

4 Date
4/23/14

5 Full name of contributor out-of-state PAC (ID#: _____)
Harold & Chris Mathews

7 Amount of contribution (\$) **200.00**

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
7106 Sansivera Cv Austin 78750

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

(If travel outside of Texas, complete Schedule T)

Date
4/24/14

Full name of contributor out-of-state PAC (ID#: _____)
Steve Brittain

Amount of contribution (\$) **100.00**

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
1100 West Ave. Austin 78701

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

(If travel outside of Texas, complete Schedule T)

Date
4/24/14

Full name of contributor out-of-state PAC (ID#: _____)
Kim Williams

Amount of contribution (\$) **150.00**

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
307 Bulian Ln Austin, 78746

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

(If travel outside of Texas, complete Schedule T)

Date
4/24/14

Full name of contributor out-of-state PAC (ID#: _____)
Mark & Kelley Menefee

Amount of contribution (\$) **100.00**

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
3508 Great Valley Dr. Cedar Park 78613

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

(If travel outside of Texas, complete Schedule T)

Date
4/24/14

Full name of contributor out-of-state PAC (ID#: _____)
Ian & Linda Forsyth

Amount of contribution (\$) **100.00**

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
2916 Mossback Ln Austin 78739

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

(If travel outside of Texas, complete Schedule T)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: *39/40*

2 FILER NAME

Sally I. Hernandez

3 ACCOUNT # (Ethics Commission Filers)

4 Date

4/24/14

5 Full name of contributor out-of-state PAC (ID#: _____)

Karen Watkins

6 Contributor address; City; State; Zip Code

9005 Heiden Ln Austin 78749

7 Amount of contribution (\$)

100.00

8 In-kind contribution description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

(If travel outside of Texas, complete Schedule T)

Date

4/24/14

Full name of contributor out-of-state PAC (ID#: _____)

Jack Roberts

Contributor address; City; State; Zip Code

400 W. 15th St. Suite 320 78701

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)

Date

4/24/14

Full name of contributor out-of-state PAC (ID#: _____)

Gary Cobb

Contributor address; City; State; Zip Code

4325 Triboro Trl. Austin 78749

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)

Date

4/24/14

Full name of contributor out-of-state PAC (ID#: _____)

Beverly Mathews

Contributor address; City; State; Zip Code

7703 Creekbluff Dr. 78750

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)

Date

4/24/14

Full name of contributor out-of-state PAC (ID#: _____)

Gordon RubINETTE

Contributor address; City; State; Zip Code

3806 Hidden Hollow 78731

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)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 4 of 16	
2 FILER NAME Sally I. Hernandez		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/24/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) L Bar Cattle & Equipment Co LLC 6 Contributor address; City; State; Zip Code 4826 Hwy 71 E Del Valle 78617	7 Amount of contribution (\$) 250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/24/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allan Williams Contributor address; City; State; Zip Code 2400 Camino Alto 78746	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/25/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Granger & Mueller Contributor address; City; State; Zip Code 605 W. 10th Austin 78701	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/26/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drew McAngus Contributor address; City; State; Zip Code 9204 Elm Creek Cove 78736	Amount of contribution (\$) 150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/27/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charles & Ann Brandt Contributor address; City; State; Zip Code 12102 Shetland Chase 78727	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

5 of 6

2 FILER NAME

Sally I Hernandez

3 ACCOUNT # (Ethics Commission Filers)

4 Date

4/30/14

5 Full name of contributor out-of-state PAC (ID#: _____)

Mindy Montford

6 Contributor address; City; State; Zip Code

1100 Guadalupe Austin 78701

7 Amount of contribution (\$)

100.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

4/30/14

Full name of contributor out-of-state PAC (ID#: _____)

Dell and Kathlyn Shaw

Contributor address; City; State; Zip Code

5 Curley Mesquite Cv 78746

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/2/14

Full name of contributor out-of-state PAC (ID#: _____)

Thomas Whitley

Contributor address; City; State; Zip Code

2712 Bobby Ln Austin 78745

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/4/14

Full name of contributor out-of-state PAC (ID#: _____)

TCSOA PAC

Contributor address; City; State; Zip Code

400 W 14th St. Suite B50 78701

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/3/14

Full name of contributor out-of-state PAC (ID#: _____)

Roger Morse

Contributor address; City; State; Zip Code

5511 Van Winkle Ln 78739

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

6 of 6

2 FILER NAME

Sally I. Hernandez

3 ACCOUNT # (Ethics Commission #)

4 Date

5/9/14

5 Full name of contributor out-of-state PAC (ID#: _____)

Brian Roark

6 Contributor address; City; State; Zip Code

1307 West Ave. Austin 78701

7 Amount of contribution (\$)
250.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

5/13/14

Full name of contributor out-of-state PAC (ID#: _____)

Karen Huber

Contributor address; City; State; Zip Code

23020 Pedernales Canyon Trl. Spicewood 78669

Amount of contribution (\$)
250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/23/14

Full name of contributor out-of-state PAC (ID#: _____)

Brad Urrutia

Contributor address; City; State; Zip Code

801 W. Oltorf St. 78704

Amount of contribution (\$)
250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/3/14

Full name of contributor out-of-state PAC (ID#: _____)

Ellen Halbert

Contributor address; City; State; Zip Code

5105 Scenic View Dr. Austin 78746

Amount of contribution (\$)
100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#: _____)

Contributor address; City; State; Zip Code

Amount of contribution (\$)

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 1	2 FILER NAME Sally I. Hernandez	3 ACCOUNT # (Ethics Commission Filers)
4 Date 4/24/14	5 Payee name El Mercado	
6 Amount (\$) 274.20	7 Payee address; City; State; Zip Code 1302 South First Austin, TX 78704	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description (If travel outside of Texas, complete Schedule T) Food for fundraiser
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 5/23/14	Payee name Go Daddy	
Amount (\$) 112.15	Payee address; City; State; Zip Code 14455 North Hayden Rd Suite 219 Scottsdale, AZ 85260	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) Website domain
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED