Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

7188

FORM CTA
PG 1

See CTA Instruction Guide for detailed instructions.

1 Total pages filed

2 CANDIDATE NAME
MS / MRS / MR: (MR) | FIRST: David | MI: A
NICKNAME | LAST: Buthross | SUFFIX: II

3 CANDIDATE MAILING ADDRESS
ADDRESS / PO BOX: P.O. Box 5396 | APT / SUITE #: | CITY: Austin | STATE: TX | ZIP CODE: 78763

4 CANDIDATE PHONE
AREA CODE: (512) | PHONE NUMBER: 970-8432 | EXTENSION:

5 OFFICE HELD (if any): ~~Commissioners Court~~

6 OFFICE SOUGHT (if known): Comm. Ss. ners court Pct 2

7 CAMPAIGN TREASURER NAME
MS / MRS / MR: (MRS) | FIRST: Betsy | MI: | NICKNAME: | LAST: Buthross | SUFFIX:

8 CAMPAIGN TREASURER STREET ADDRESS (Residence or business)
STREET ADDRESS (NO PO BOX PLEASE): 7901 Cameron III | APT / SUITE #: | CITY: Austin | STATE: TX | ZIP CODE: 78754

9 CAMPAIGN TREASURER PHONE
AREA CODE: (512) | PHONE NUMBER: 300-7919 | EXTENSION:

10 CANDIDATE SIGNATURE

I am aware of the Nepotism Law, Chapter 573 of the Texas Government Code.

I am aware of my responsibility to file timely reports as required by title 15 of the Election Code.

I am aware of the restrictions in title 15 of the Election Code on contributions from corporations and labor organizations.

Signature of Candidate

12-30-09
Date Signed

OFFICE USE ONLY
Acct #
Date Received
FILED FOR RECORD
'09 DEC 1 A9:03
DANA DEBEAUVOIR
COUNTY CLERK
TRAVIS COUNTY, TEXAS
Date Processed
Date Imaged

GO TO PAGE 2

CANDIDATE MODIFIED REPORTING DECLARATION

FORM CTA
PG 2

11 CANDIDATE NAME	David A Buttross II
12 MODIFIED REPORTING DECLARATION	**COMPLETE THIS SECTION ONLY IF YOU ARE CHOOSING MODIFIED REPORTING.**

•• This declaration must be filed no later than the 30th day before the first election to which the declaration applies. ••

•• The modified reporting option is valid for one election cycle only. ••
(An election cycle includes a primary election, a general election, and any related runoffs.)

•• Candidates for the office of state chair of a political party and candidates for county chair of a political party may NOT choose modified reporting. ••

I do not intend to accept more than $500 in political contributions or make more than $500 in political expenditures (excluding filing fees) in connection with any future election within the election cycle. I understand that if either one of those limits is exceeded, I will be required to file pre-election reports and, if necessary, a runoff report.

2010
Year of election(s) or election cycle to which declaration applies

Signature of Candidate

This appointment is effective on the date it is filed with the appropriate filing authority.

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CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

7223

FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

1 ACCOUNT # (Ethics Commission filers)

2 Total pages filed:

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR: FIRST: David MI:

NICKNAME: LAST: Buttross SUFFIX:

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ Change of Address

ADDRESS / PO BOX: P. O. Box 5396 APT / SUITE #: CITY: Austin STATE: TX ZIP CODE: 78

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE: (512) PHONE NUMBER: 494 1111 EXTENSION:

6 CAMPAIGN TREASURER NAME

MS / MRS / MR: FIRST: Betsy MI: Freeman

NICKNAME: LAST: Buttross SUFFIX:

7 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE): 7901 cameron Rd APT / SUITE #: Bldg 3 suite 100 CITY: Austin, TX STATE: ZIP CODE: 78754

8 CAMPAIGN TREASURER PHONE

AREA CODE: (512) PHONE NUMBER: 320 - 0888 EXTENSION:

9 REPORT TYPE

☑ January 15 ☐ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (officeholder only)

☐ July 15 ☐ 8th day before election ☐ Exceeded $500 limit ☐ Final report (Attach C/OH - FR)

10 PERIOD COVERED

Month / Day / Year: 01 / 01 / 10 THROUGH Month / Day / Year: 01 / 13 / 10

11 ELECTION

ELECTION DATE Month / Day / Year: / /

ELECTION TYPE: ☑ Primary ☐ Runoff ☐ General ☐ Special

12 OFFICE

OFFICE HELD (if any): N/A

13 OFFICE SOUGHT (if known): County Commissioner Precinct 2

14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS

** Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. **

Name

Address / PO Box; Apt. / Suite #; City; State; Zip Code

☐ additional pages

OFFICE USE ONLY

Date Received: 10 JAN

Date Hand-delivered: P1 Date Postmarked

Receipt # Amount

Date Processed

Date Imaged

FILED FOR RECORD
DANA DEBEAUVOIR
COUNTY CLERK
TRAVIS COUNTY, TEXAS

GO TO PAGE 2

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME: David Buttross

16 ACCOUNT # (Ethics Commission Filers):

17 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

COMMITTEE TYPE
☐ GENERAL
☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

18 CONTRIBUTION TOTALS

1.	TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$ 0
2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 0

EXPENDITURE TOTALS

3.	TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$ 0
4.	**TOTAL POLITICAL EXPENDITURES**	$ 0

CONTRIBUTION BALANCE

5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 0

OUTSTANDING LOAN TOTALS

6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 0

19 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.

Signature of Candidate or Officeholder

YOUSSEF LAHLOU
Notary Public, State of Texas
My Commission Expires
September 07, 2013

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said David Buttross, this the 13th day of January, 2010, to certify which, witness my hand and seal of office.

Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath
	Youssef Lahlou	Notary

Revised 08/25/2009

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

7413

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

1 ACCOUNT# (Ethics Commission filers)

2 Total pages filed: 7

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR	FIRST	MI
Mr.	David	Anthony
NICKNAME	LAST	SUFFIX
	Buttross	

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ Change of Address

ADDRESS / PO BOX:	APT / SUITE #:	CITY:	STATE:	ZIP CODE
PO Box 5396				
Austin, Texas, 78763				

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE	PHONE NUMBER	EXTENSION
(512)	9708932	

6 CAMPAIGN TREASURER NAME

MS / MRS / MR	FIRST	MI
	Betsy	
NICKNAME	LAST	SUFFIX
	Buttross	

7 CAMPAIGN TREASURER ADDRESS *(Residence or business)*

STREET ADDRESS (NO PO BOX PLEASE)	APT / SUITE #:	CITY:	STATE:	ZIP CODE
PO Box 203174				
Austin, Texas, 78720				

8 CAMPAIGN TREASURER PHONE

AREA CODE	PHONE NUMBER	EXTENSION
(512)	970-8932	

OFFICE USE ONLY

Date Received

FILED FOR RECORD
2010 JUL 15 PM 3:44
COUNTY CLERK
TRAVIS COUNTY, TEXAS

Date Hand-Delivered or Date Postmarked

Receipt Amount

Date Processed

Date Imaged

9 REPORT TYPE

☐ January 15 ☐ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (officeholder only)

☒ July 15 ☐ 8th day before election ☐ Exceeded $500 limit ☐ Final report (Attach C/OH - FR)

10 PERIOD COVERED

Month	Day	Year		Month	Day	Year
4	1	2010	THROUGH	6	30	2010

11 ELECTION

ELECTION DATE

Month	Day	Year
6	30	2010

ELECTION TYPE

☐ Primary ☐ Runoff ☒ General ☐ Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

County Commissioner in District #2

14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS

** Direct campaign expenditures are campaign expenditures made by others without the candidate's *prior consent or approval*. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. **

Name

Address / PO Box: Apt. / Suite #: City: State: Zip Code

☐ additional pages

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME
David Buttross

16 ACCOUNT # (Ethics Commission Filers)

17 NOTICE FROM POLITICAL COMMITTEE(S)

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COMMITTEE TYPE
☐ GENERAL
☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages

18 CONTRIBUTION TOTALS	1.	TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$ 200.00
	2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 485.00
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$ 0.00
	4.	**TOTAL POLITICAL EXPENDITURES**	$ 12.86
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 0.00
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 0.00

19 AFFIDAVIT

MARISA GOMEZ
Notary Public, State of Texas
My Commission Expires
August 20, 2013

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

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said David Buttross, this the 15th day of July, 20 10, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Marisa Gomez — Printed name of officer administering oath | Title of officer administering oath

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

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 2

2 FILER NAME: David Buttross

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
4/13/2010	Regina Buttross Dargahi 9603 Kangaroo Lane AUSTIN, TX 78748	25.00	(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions): Attorney

10 Employer (See Instructions): Law Office of Regina Buttross, P.C.

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/13/2010	Payman Dargahi 9603 Kangaroo Lane AUSTIN, TX 78748	25.00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions): General Manager

Employer (See Instructions): Home Depot

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/21/2010	Scott Shirey 10409 Snapdragon Austin, TX 78739	10.00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions): Real Estate

Employer (See Instructions): Self

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/23/2010	Jay Marie Buttross 8701 Ampezo Trl austin, TX 78749	5.00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions): retired

Employer (See Instructions): None

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/23/2010	youssef Lahlou 2600 Penny ln #123 Austin, TX 78757	100.00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions): Manager

Employer (See Instructions): Administaff

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: 2 of 2

2 FILER NAME: David Buttross

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#:_____))	6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)	9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
4/23/2010	Loubna Tahiri	8600 RR 620 north apt:1524 Austin, TX 78726	25.00 (If travel outside of Texas, complete Schedule T)		Periodontist	Carus Dental
4/23/2010	Anass Bennani	15312 Morgan Creekk Ct Austin, TX 78717	20.00 (If travel outside of Texas, complete Schedule T)		MIS Director	Michael Angelos
4/23/2010	Bahija Joudar	11701 Sarducci Lm Austin, TX 78748	25.00 (If travel outside of Texas, complete Schedule T)		N/A	N/A
5/3/2010	Bryan Kastleman	2714 Bee Cave Road Ste 204 Austin, TX 78746	25.00 (If travel outside of Texas, complete Schedule T)		President	Kastleman & Associates, Inc
5/8/2010	George Sears McGee	1623 Watchhill Road Austin, TX 78703	25.00 (If travel outside of Texas, complete Schedule T)		Realtor	self

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 1 of 3

2 FILER NAME
David Buttross

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
4/13/2010	Piryx, Inc. 401 W 15th Street Suite 520 Austin, TX 78701	1.13

8 Purpose of payment (See instructions regarding type of information required.)
Transaction fee
(If travel outside of Texas, complete Schedule T)

9 ** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4/13/2010	Piryx, Inc. 401 W 15th Street Suite 520 Austin, TX 78701	1.13

Purpose of payment (See instructions regarding type of information required.)
Transaction fee
(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4/21/2010	Piryx, Inc. 401 W 15th Street Suite 520 Austin, TX 78701	0.45

Purpose of payment (See instructions regarding type of information required.)
Transaction fee
(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4/23/2010	Piryx, Inc. 401 W 15th Street Suite 520 Austin, TX 78701	0.23

Purpose of payment (See instructions regarding type of information required.)
Transaction fee
(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name | Office sought | Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 2 of 3

2 FILER NAME: David Buttross

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
4/23/2010	Piryx, Inc. 401 W 15th Street Suite 520 Austin, TX 78701	4.50

8 Purpose of payment (See instructions regarding type of information required.): Transaction fee
(If travel outside of Texas, complete Schedule T)

9 ** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4/23/2010	Piryx, Inc. 401 W 15th Street Suite 520 Austin, TX 78701	1.13

Purpose of payment (See instructions regarding type of information required.): Transaction fee
(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4/23/2010	Piryx, Inc. 401 W 15th Street Suite 520 Austin, TX 78701	0.90

Purpose of payment (See instructions regarding type of information required.): Transaction fee
(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4/23/2010	Piryx, Inc. 401 W 15th Street Suite 520 Austin, TX 78701	1.13

Purpose of payment (See instructions regarding type of information required.): Transaction fee
(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name | Office sought | Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 3 of 3

2 FILER NAME: David Buttross

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
5/3/2010	Piryx, Inc. 401 W 15th Street Suite 520 Austin, TX 78701	1.13

8 Purpose of payment (See instructions regarding type of information required.): Transaction fee
(If travel outside of Texas, complete Schedule T)

9 ** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
5/8/2010	Piryx, Inc. 401 W 15th Street Suite 520 Austin, TX 78701	1.13

Purpose of payment (See instructions regarding type of information required.): Transaction fee
(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)

Purpose of payment (See instructions regarding type of information required.)
(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)

Purpose of payment (See instructions regarding type of information required.)
(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name | Office sought | Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED