AMENDMENT: APPOINTMENT OF A **CAMPAIGN TREASURER BY A CANDIDATE**

FORM ACTA

CANDIDATE NAME KAR	REN FORD 2 ACCOUNT#	3 Total pages filed:				
See ACTA Instruction Use this form for ch	See ACTA Instruction Guide for detailed Instructions. Use this form for changes to existing information only. Do not provide information previously disclosed.					
CANDIDATE NAME	NEW MS / MRS / MR FIRST MI KAREN L. NICKNAME LAST SUFFIX	OFFICE USE ONLY Cate Received RECEIVED IN THE				
CANDIDATE MAILING ADDRESS	NEW ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE 100 COMMONS BD STE 7-15Z DRIPPINGSPINGS/X 786ZD	DEC 9 2 2009 CELECTION OFFICE Date Hand-delivered or Date Postmarked				
CANDIDATE PHONE	NEW AREA CODE PHONE NUMBER EXTENSION (5/2) 927 - 8234 NEW 1	Date Processed				
OFFICE HELD (# any)	HAYS COUNTY COMMISSION POLY	Date Imaged				
OFFICE SOUGHT (if known)	K (c ((
CAMPAIGN TREASURER NAME	BARBARA L. # 5TT	ROUD				
CAMPAIGN TREASURER STREET ADDRESS (Residence or business)	NEW STREET ADDRESS (NO POBOX PLEASE): APT / SUITE #, CITY: STATE: 14045 Robins Run Austin, TX 78737	ZIP CODE				
11 CAMPAIGN TREASURER PHONE	(512) 923-734					
CANDIDATE SIGNATURE	I am aware of the Nepotism Law, Chapter 573 of the Text I am aware of my responsibility to file timely reports as r the Election Code. I am aware of the restrictions in title 15 of the Election Co from corporations and labor organizations. Signature of Candidate	equired by title 15 of				
	GO TO PAGE 2					

CANDIDATE / OFFICEHOLDER

FORM C/OH

CAMPAIG	N FINANCE REPORT		COVER SHEET PG T
The C/OH Instruction G	uide explains how to complete this form.	1 ACCOUNT# (Ethics Commission filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	ms/mrs/mr first MS Karen	M) L	OFFICE USE ONLY
	NICKNAME LAST FOOD	SUFFIX	Date Received
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address			Date Received JAN 15 200 Date Hand-delivered or Date Postmarked
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (512) 922-823	EXTENSION	Receipt # Amount Date Processed
6 CAMPAIGN TREASURER NAME	MS MRS/MR FIRST JEAN NICKNAME LAST RACKUS	SUFFIX	Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or business)	Owline Til		ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (512) 795 - 0300	EXTENSION	
9 REPORTTYPE	January 15 30th day before elect		15th day after campaign treasurer appointment (officeholder only) Final report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year THR	OUGH 6/30	
11 ELECTION	ELECTION DATE ELECTION I Month Day Year Primal		General Special
12 OFFICE	Hous County Commissioner -	13 OFFICE SOUGHT (if to	nown)
14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS		n expenditures made by others without	out the candidate's prior consent or approva n of the direct campaign expenditure. ••
additional pages	Address / PO Box; Apt. / Suite #; City; State;	Zip Code	
	GO TO	PAGE 2	

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

15 C/OH NAME	Saren For	4		16 ACCOUNT # (Ethics Commission Filers)		
17 NOTICE FROM POLITICAL	candidate / officehold		n made without the candidate's	by political committees to support the or officeholder's knowledge or consent. tice of such expenditures.		
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME				
	GENERAL SPECIFIC	COMMITTEE ADDRESS				
additional pages		COMMITTEE CAMPAIGN TREASURER N	АМЕ			
		COMMITTEE CAMPAIGNTREASURER ADDRESS				
18 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF S S, LOANS, OR GUARANTEES OF				
	l .	POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GU		\$ &		
EXPENDITURE TOTALS	3. TOTAL F	POLITICAL EXPENDITURES OF \$8	50 OR LESS, UNLESS ITEM	\$ Ø		
	4. TOTAL	POLITICAL EXPENDITURES		\$ 8		
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAIL DRTING PERIOD	NTAINED AS OF THE LAST	\$ 1258,31		
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUT LY OF THE REPORTING PERIOD	STANDING LOANS AS OF	THE \$ 9		
19 AFFIDAVIT						
	JIMMIE L. ROBINSON MY COMMISSION EXPIRE May 29, 2011	is true		f perjury, that the accompanying report information required to be reported by		
1			Raien	**************************************		
AFFIX NOTARY STAME	7 / SEAL ABOVE		Signature of Car	ndidate of Officeholder		
Sworn to and subscrit	bed before me, by	the said KAREN F	ORID	, this the day		
\wedge	_	tify which, witness my hand a		-		
Jammie K	alunoon		INSON	natary		
Signature of officer ad	Iministering cath	Printed name of officer ad	ministering oath	Title of officer administering oath		

The C/OH Instruction G	uide explains how to complete this form. 1 ACCOUNT# (Ethics Commission filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER	MS/MRS/MR FIRST MI	OFFICE USE ONLY
NAME	MS FAREN L. NICKNAME LAST SUFFIX	· Date Received
	FORD	RECT JAN 15 2009
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE	BECO JAN 1 40
MAILING ADDRESS	100 Commons Rd # 7-15Z	Date Hand-delivered or Date Postmaked
Change of Address 5 CANDIDATE/	DRIPPIDG SPRIUGS, TX 7860	-
OFFICEHOLDER PHONE	(512) 922-8234	Receipt # Amount
6 CAMPAIGN TREASURER	MS/MRS/MR FIRST MI	Date Processed Date Imaged
NAME	NICKNAME LAST SUFFIX	
	Backus	
7 CAMPAIGN TREASURER	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE;	ZIP CODE
ADDRESS (Residence or business)	4407 Bee Cave Pd-Bldg6- Austin TX 78746	المون ١٠٠٠
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 795 - 0300	
9 REPORT TYPE	January 15 30th day before election Runoff	15th day after campaign treasurer appointment (officeholder only)
	July 15 ath day before election Exceeded \$500 limit	Final report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year THROUGH 12/31	Year OB
11 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year	
	Pnmary Runoff	General Special
12 OFFICE	OFFICE HELD (if any) 13 OFFICE SOUGHT (if know)	p)
14 NOTICE	Hays County Commissioner - Pet 4	Γ
OF DIRECT CAMPAIGN	 Direct campaign expenditures are campaign expenditures made by others without Candidates are required to disclose this information only if they receive notification of 	
EXPENDITURE BY OTHER	Name	
INDIVIDUALS		
:	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

(512) 463-5800

15 C/OH NAME	KAREN	FORD	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. 				
COMMITTEE(3)	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL SPECIFIC	COMMITTEE ADDRESS			
additional pages		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRESS			
18 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZE			
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 3075.00		
EXPENDITURE TOTALS	3. TOTAL	POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMI	\$ Ø		
	4. TOTAL	POLITICAL EXPENDITURES	\$ 825.68		
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST (ORTING PERIOD	\$1,258.31		
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF T AY OF THE REPORTING PERIOD			
19 AFFIDAVIT					
8	JIMMAE L. ROBINSOI MY COMMISSION EXPIR May 29, 2011	is true and correct and includes all me under Title 15, Election Code.	perjury, that the accompanying report information required to be reported by		
		Signature of Can	didate or Officeholder		
AFFIX NOTARY STAMI	P/SEALAROVE	J.g., J.d. J G OBT			
		shorted WAREN ECC.	To the		
Δ.	_	the said KAREN FORO tify which, witness my hand and seal of office.	, this the(&_ = day		
Signature of officer ac	Dungon	JIMMIE ROBINSON	Valory Title of officer admir/stering oath		
"	_	-	J J		

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

SCH		••	_	A
SCH	ŁDI	JŁ.	E	н

	The Instruction	Guine explains how to complete this form.		1 Total pages Scher	dule A:		
2	FILER NAME	Karen Ford		3 ACCOUNT # (Eth	ics Commission filers)		
4	Date C. O.O.t	5 Full name of contributor out-of-state PAC (IDE_		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	Sept 1008	6 Contributor address; City; State; Zip Code 13689 NUHY Brown	Pd	50	 		
9	Principal occur	Austin TV 78737	10 Employer (See Ins	structione)			
_	Пакарагосса	Saturity Sub-like (See Historicals)	10 Employer (October				
	Dete O	Full name of contributor out-of-state PAC (IDIF_)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	9-5-08	Contributor address; City; State; Zip Code 1472 Rear Creek	T865	100	[]]		
L		Austin TX 7873	37				
Principal occupation / Job title (See Instructions)			Employer (See Ins	structions)			
	Date	Full name of contributorout-of-state PAC (ID#:		Amount of contribution (\$)	In-kind contribution description (if applicable)		
(9-8-08	ted Lehr contributor address; city; state; zip code 13240 field stone Loc Austin TX 78737	 PP	100	 		
	Principal occu	pation / Job title (See Instructions)	Employer (See Inc	structions)			
	Date	Full name of contributor out-of-state PAC (IDIF)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	10-5-08.	contributor address; City; State; Zip Code 16204 Hidden Spring Austin TX 78737	5	100	 		
	Principal occu	petion / Job title (See Instructions)	Employer (See In	structions)	· · · · · · · · · · · · · · · · · · ·		
	Date	Full name of contributorout-of-state PAC (ID#:		Amount of contribution (\$)	In-kind contribution description (if applicable)		
	10-5-08	Contributor address; City; State; Zip Code			оевсприот (паррисана)		
		9300 mc Gregor Lane Dripping springs	X 78600	100	 		
	Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)			

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

			-
	EDUŁ		-
эсп	EVUL	-E	•

The Instruction	Gude explains how to complete this form.		1 Total pages Schedule A: 3 of 5		
2 FILER NAME	KAREN FORD		3 ACCOUNT # (Eth	ics Commission filera)	
4 Date	5 Full name of contributor out-of-state PAC (IDM:	wK	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
9-2008	6 Contributor address; City: State: Zip Code 1049 Sunset Canyo Dripping Springs T		100		
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See Ins	structions)		
Date	Full name of contributor Out-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)	
9-2008	Contributor address; City: State; Zip Code 201 W. Fitzhush Rd	. 70	100	 	
Principal occupation / Job title (See Instructions) Employe			structions)	I	
Date	Full name of contributor out-of-state PAC (IDF:		Amount of contribution (\$)	In-kind contribution description (if applicable)	
9-2008	Contributor address; City; State; Zip Code 3700 River Rd Wimberley TX 7:	8676	100	 	
Principal occur	pation / Job title (See Instructions)	Employer (See In	structions)		
Date	Full name of contributorout-of-state PAC (ID#:		Amount of contribution (\$)	In-kind contribution description (if applicable)	
9-2008.	contributor address: City; state; Zip Code 702 Cotton Wood Cre Dripping Springs	-	100	 	
Principal occur	petion / Job title (See Instructions)	Employer (See In	structions)	<u> </u>	
Date	Full name of contributorout-of-state PAC (IDSt)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
9-2008	contributor address; City; State; Zip Code 401 Autumn Lane Dripping Springs T	X 78600	100	 	
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)		

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

	CAL CONTRIBUTIONS THAN PLEDGES OR LOANS	S		SCHEDULE A
The Instruction	Gude explains how to complete this form.		1 Total pages Sche	dule A: 0 F 5
FILER NAME	KAREN FORD		3 ACCOUNT# (Et	nics Commission filers)
Date	5 Full name of contributorout-of-state PAC (IDF:):	7 Amount of	8 In-kind contribution
^	Donna Brasher		contribution (\$)	description (if applicable)
9-2008	6 Contributor address; City; State; Zip Code			<u> </u>
	P.O. Bay 1030 -	τ-	100.	!
	Tripping sorings	1X 78/000		<u>.</u>
Principal occur	pation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor Out-of-state PAC (ID#:_		Amount of	In-kind contribution
9-2008	Kathy Carrillet Contributor address; City; State; Zip Code P.O. Box 1113	······································	100.	description (if applicable)
	Dripping Springs	× 78620		
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor Out-of-state PAC (ID#_		Amount of	In-kind contribution
	melodie Greider		contribution (\$)	description (if applicable)
9-2008	Contributor address; City; State; Zip Code	1 7-1		1
, 200	11300 Banham Bar		100.	1
	Dripping Springs	1× 7862		1
Principal occu	pation / Job title (See Instructions)	Employer (See In	nstructions)	
Date	Full name of contributor out-of-state PAC (IDE_		Amount of	In-kind contribution
9-2008	Bill & Jan + Juerau Contributor address; City: State; Zip Code		contribution (\$)	description (if applicable
, 2000.	224 Windy Hills &	Ø	150	1
	Dripping Springs T	X 7867)		
	petion / Job title (See Instructions)	Employer (See In		

9-2008 Contributor address; City; State; Zip Code
110 Roy Creek Trail
250.

Principal occupation / Job title (See Instructions)

Contributor address; City; State; Zip Code
250.

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

Employer (See Instructions)

Principal occupation / Job title (See Instructions)

-	POLITIC	AL EXPENDITURES			SCHEDULE F
-	The метнистюн	Quice explains how to complete this form.		1 Total pages	Schedule F: 1 of 2
2	FILER NAME	KAREN FORD		3 ACCOUNT	(Ethics Commission filers)
4	7-1-08	5 Payee name KACEN FORD 6 Payee address; City; State; Zip Code		,	7 Amount (\$)
8	required.)	eimbursement - umpaign mail box-lyr.	9 Complete if di Candidate / Officeholder r	•	to benefit C/OH Office sought Office held
	Date 8-6-03	Payee name Michele Walters Payee address; city; State; Zip Code 7631 Hwy 290 West Austin TX 78736			Amount (\$)
		ment (See instructions regarding type of information Xeta Entry & Admin .	↔ Complete if di Candidate / Officeholder	•	to benefit C/OH Office sought Office held
	Date D-8.08	Payee name Print Plus Payee address: City; State; Zip Code 400-A Hury 290 WE Dripping Springs	st 汉		Arriount (\$) 251.68
	required.)	ment (See instructions regarding type of information Printing — mailer	⇔ Complete if d Candidate / Officeholder	•	to benefit C/OH Office sought Office held
	Date 8-2708	Payee name Dripping Springs mpi Payee address; City; State; Zip Code Dripping Springs Ty			Amount (\$) 94.00
	Purpose of par required.)	yment (See instructions regarding type of Information	Candidate / Officeholder	name	to benefit C/OH Office sought Office held
1	ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED				

	KAREN YOUD		
(Date	The Friends Four	ndation	7 Amount (\$)
9-2-08	6 Payee address; City: State; Zip Code		250.
	Drippins Springs	X 787620	
required.)	exponent (See instructions regarding type of information SPONSONSHIP - BROWN HOLD - Profit - de of Texas, complete Schedule 1)	9 Complete if direct expenditure Cendidate / Officeholder name	to benefit C/OH ** Office sought Office held
· Date	Payee name		Amount (\$)
	Payee address; City; State; Zip Code		
required.)	nyment (See instructions regarding type of information de of Texus, complete Schedule T)	→ Complete if direct expenditure Candidate / Officeholder name	to benefit C/OH Office sought Office held
Date	Payee name .	<u> </u>	Amount (\$)
	Payee address; City; State; Zip Code		
Purpose of pa required.)	syment (See Instructions regarding type of information	Complete if direct expenditure Candidate / Officeholder name	a to benefit C/OH ** Office sought Office held
(# travel out	side of Yexas, complets Schedule T)		
Date	Payee name		Amount (\$)
·	Payee address; City; State; Zip Code		
Purpose of pa required.)	syment (See Instructions regarding type of information	Complete if direct expenditure Candidata / Officeholder name	o to benefit C/OH •• Office sought Office held
(If travel outsi	ide of Texas, complete Schedule T)		*
	ATTACH ADDITIONAL COPIE	S OF THIS FORM AS NEEDED	
			Revised 10/02/20

CANDIDATE	OFFICE	HOLDER
CAMPAIGN	FINANCE	REPORT

The C/OH INSTRUCTION GUIDE explains how to complete (Ethics Commission (Bers)) CANDIDATE / OFFICEHOLDER NAME NICKNAME LAST CANDIDATE / OFFICEHOLDER OFFICEHOLDER MAILING ADDRESS / FO BOX: APT / SUITE *: CITY: STATE: ZIP CODE MAILING (Ethics Commission (Bers))	OFFICE Definition of the second of the seco	Amount
CANDIDATE / OFFICEHOLDER NICKNAME LAST SUFFIX CANDIDATE / OFFICEHOLDER MAILING ADDRESS /FO BOX: APT / SUITE #: CITY: STATE: ZIP COOR OFFICEHOLDER MAILING ADDRESS DESTINATION OFFICEHOLDER PHONE OFFICEHOLDER PHONE OFFICEHOLDER (5/2) 922-8234 CAMPAIGN TREASURER NAME STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: SUFFIX CAMPAIGN TREASURER ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: APT OFFICEHOLDER PHONE OF DUBLINGES (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: APT OFFICEHOLDER PHONE OF DUBLINGES (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: APT OFFICEHOLDER PHONE OF DUBLINGES (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: APT OFFICEHOLDER PHONE OF DUBLINGES (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: APT OFFICEHOLDER PHONE NUMBER EXTENSION (S. 12) TO SOIL DUBLINGES (S. 12) TO	Parameter of the parame	5 2009 NOTE: Posts Postmarked Amount
CANDIDATE / OFFICEHOLDER MAILING ADDRESS DO COMMONS Rd 17-15Z Change of Address Dripping Springs X 78620 Change of Address Dripping Springs X 78620 CANDIDATE / OFFICEHOLDER AREA CODE PHONE NUMBER EXTENSION CAMPAIGN TREASURER NICKNAME LAST SUFFIX CAMPAIGN TREASURER ADDRESS (NO PO BOX PLEASE): APT / SUITE #: STATE: ATTENSION CAMPAIGN TREASURER ADDRESS (NO PO BOX PLEASE): APT / SUITE #: STATE: ATTENSION CAMPAIGN TREASURER ADDRESS (NO PO BOX PLEASE): APT / SUITE #: STATE: ATTENSION CAMPAIGN AREA CODE PHONE NUMBER EXTENSION CAMPAIGN AREA CODE PHONE NUMBER EXTENSION TREASURER ADDRESS	Pacelpt # Date Hand-defivered of Date Imaged ZIP CODE LOCAL 15th day after on	Amount
OFFICEHOLDER MAILING ADDRESS Change of Address CANDIDATE/ OFFICEHOLDER PHONE AREA CODE PHONE NUMBER CAMPAIGN TREASURER NAME CAMPAIGN TREASURER ADDRESS (Residence or business) CAMPAIGN TREASURER PHONE AREA CODE PHONE NUMBER EXTENSION FUND FUND Bith day before election Exceeded \$500 limit Exceeded \$500 limit	Pace Processed Date Processed ZIP CODE LOCAL 15th day after on	Amount
CAMPAIGN TREASURER NAME CAMPAIGN TREASURER NAME CAMPAIGN TREASURER NAME CAMPAIGN TREASURER NAME CAMPAIGN TREASURER ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY; STATE: Residence or business) CAMPAIGN TREASURER ADDRESS (Residence or business) CAMPAIGN TREASURER PHONE CAMPAIGN TREASURER PHONE AREA CODE PHONE NUMBER PHONE STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY; STATE: TY	Date Processed Date Imaged ZIP CODE L. G.Z.	
TREASURER NAME CAMPAIGN TREASURER ADDRESS (Residence or business) CAMPAIGN TREASURER ADDRESS (Residence or business) CAMPAIGN TREASURER PHONE AREA CODE PHONE NUMBER EXTENSION FEPORT TYPE Jany 15 SUFFIX STATE: TY TY TY TY TY TY TY TY TY T	ZIP CODE	Mosion tressurer
TREASURER ADDRESS (Residence or business) CAMPAIGN TREASURER PHONE AREA CODE PHONE NUMBER EXTENSION EXTENSION FREPORT TYPE January 15 July 15 Sin day before election Excessed \$500 limit	15th day after on	Midelion treesurer
TREASURER	15th day after on appointment (offi	mpelon treasurer
July 15 Sth day before election Exceeded \$500 limit	15th day after on appointment (eth	mpaion treasurer
O PERIOD Month Day Year Month Day	Finel report (Atte	cehoider only)
COVERED 1/1/09 THROUGH 6/30/	09	
1 ELECTION DATE ELECTION TYPE Month Day Year Primary Runoff G	ienszul	Special
2 OFFICE DIFFICE HELD (Hany) Hays County Commissioner — In	34	
4 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER ** Direct campaign expenditures are campaign expenditures made by others without the candidates are required to disclose this information only if they receive notification of the direct	iate's prior consent o	
Address / PO Box; Apx / Suite #: City; State; Zip Code		
GO TO PAGE 2	·	

CANDIDATE / OFFICEHOLDER	REPORT:
SUPPORT & TOTALS	

15 C/OH NAME	Saren F	ford	16 ACCOUNT #(6750x Commission Bass)	
17 NOTICE FROM POLITICAL COMMITTEE(S)	may have been made	on of political expenditures by political committees to support the carr without the candidate's or officeholder's knowledge or consent. Candi they receive notice of such expanditures. ••		
COMMUNICE(S)	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL SPECIFIC	COMMITTEE ADDRESS		
additional pages		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRESS		
18 CONTRIBUTION TOTALS		OLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZE		
ļ		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ \$	
EXPENDITURE TOTALS	3. TOTAL P	DLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEM	S S	
	4. TOTAL	POLITICAL EXPENDITURES	\$ 406.00	
CONTRIBUTION BALANCE		DLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST I	\$ 406.00 \$ 3004.37	
OUTSTANDING LOAN TOTALS		RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF T Y OF THE REPORTING PERIOD		
No	MICHELE C. WALTER stary Public, State of Te My Commission Expire January 30, 2011	is true and correct and includes all me under Title 15, Election Code.	perjury, that the accompanying report information required to be reported by	
Signature of Candidate or Officeholder AFFIX NOTARY STAMP / SEAL ABOVE **AFFIX NOTARY STAMP / SEAL ABOVE** **AFFIX NOTA				
Sworn to and subscrit	C	fy which, witness my hand and seal of office.	this the day	
Signature of officer ad	C. Hall Immissering call	Michele C. Waters Printed name of officer administering oath	Mortary Title of officer administring cath	
8				

The state of the s

Texas Ethice Commit	ssion P.O. Box 12070 Austin, Texas 78711-2070 (51	2) 463-5800 1-800-325-8806
,	TE / OFFICEHOLDER N FINANCE REPORT	FORM C/OH COVER SHEET PG 1
The C/OH Instruction (Islate explains how to complete this form. 1 ACCOUNTS (Minice Commission fluxs)	2 Total pages that:
3 CANDIDATE / OFFICEHOLDER	May have / hart Firet his	OFFICE USE ONLY
NAME	NOTIONAL DAREN	RECEIVED IN THE
	FORD	h
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOR: AFT / BUTTER; OTTY; STATE; ZP OCCE	JAN 1 5,2010
MAILING ADDRESS	100 Commons RD #7-152	ELECTION DEFICE
Change of Address	DRIPPING SPRINGS, TX 78620	
# CANDIDATE/ OFFICEHOLDER	AREA CODE PHONE NUMBER EXTENSION	Rassist # Amount
PHONE 6: CARPAIGNI	(512) 922-8234	Date Processed
TREASURER NAME	Barbara L.	Dens Imaged
I TOTAL	Macinolanum Surince	
7 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASES: APT/SUITE: OTY) STATE;	ZIP CODE
TREASURER ADDRESS (Residence or business)	14045 Robins Run Aust	in TX 78737
S CAMPAIGN TREASURER PHONE	1512) 923 - 734	
9 REPORT TYPE	Junuary 15 30th day battons election Pun off	159h day after eampeign treasurer stockstonent (officer-older crity)
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10 PERIOD COVERED	7/1/2009 THROUGH 12/31	/2009
11 ELECTION	ELECTION CATE Month Day Year	
	Pitrery Li Runoff Li	
12 OFFICE	HAYS COUNTY COMMISSIONER - FRT 4	(same)
14 NOTICE OF DIRECT CAMPAIGN	Direct compaign expanditures are campaign expanditures made by others without Candidates are required to disclose this information only if they receive notification of	
EXPENDITURE BY OTHER INDIVIDUALS	Nertice :	
	Address / PO Boto: Apt. / Sults #t; City; State; Zip Code	
additional pages		
	GO TO PAGE 2	

19 NOTICE FROM POLITICAL COMMATTEE(S) - The bot is far refer of polici corribotions accessed or policial responditures and by policial corribotions and policial corribotions and policial corribotions and policial corribotions and other the production of the produ	CANDIDA' SUPPORT	TE / OFFIC	EHOLDER REPORT:	1-800-325-8606 FORM C/OH COVER SHEET PG 2		
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12/5/09	John S. Adems	1006 Oak Meadow Drive	Dripping Springs	×	78620	250.00
11/15/08	Ann Connell	P.O. Box 35	Driftwood	¥	78619	100.00
947709	Alan Rossing	133 Glosson Rench Rd	Orloping Springs	×	3852	100.00
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Report Period Page 1 of 2	Barbara Stroug, Treasurar Report Period: 7-1-00 through 12-31-00 Page 1 of 2				"	
DATE	EVYE!	ADORERS	CITY	STATE	1	-
67708	Heys County Livestock Expo	P.D. Ack 1716	Kyle	7	2	8000
9020	Haya County Democratic Party	P. O. Box 1246	8	K	78610	20000
87778	Herrison Ranch Park	P.O. Box 364	8	ĭ	78620	250.00
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	Event catering	APPLE SACTOR CREEKS - MEETER	TOPE TO	Þ	78124	COLC
945/00	Cedar Valley Sorts	12002 W. Hwy 280	Coder &	ĭ	78737	511.00
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87178	Jay Wheeler	340 Water P.	Sex Make Tr	¥.	7344	1000
8/17/08	Hays County Shariffs Office	1307 old UNINER SE MEEDS	She Macos	7	7244	8
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10/14/00	888	Ortoping Springs Stn	8	צ	78620	4.00
10/19/09	Witherly Miley Watershed Assn	P.O. Box 2534	Umber tex	ĸ	787.16	4000
10/26/09	Total Constant to Regarding event	7631 Ac. 290 L	į	ř	73754	
11/9/09	Retrob-event decorations Heys County Democratic Party	P.O. Box (246	Buda	ĭ	78610	120.00
11/8/09	Annual dues Pun Niu Graphics	1205 Cenyonwood Dr DS	2	72	78420	60.00
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POLITICAL EN BETHERNULE F. Bethern Stroud Report Period:	POLITICAL EXPENDITURES BCHEDULE F — Kares Ford Cempelos Barbara Stroud, Tressurer Report Period: 7-1-09 frough 12-31-09 Page 2 of 2					
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1/8/00	Liz Sunter	P.D. Box 21 23	Westerla, TR.	F	1816	20000
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12/12/09	Pun No Graphics	1205 Cenyonwood Dr C8	8	K	78620	98.00
12/22/09	Hays County Treesurer	County Courthouse	Sen Mercos TX	1 !	7557	26.00
12/27/00	Keren Ford Reimburse for booth meterials, Chri	13500 Nuth Brown Rd Austin	Acet	K	78787	108.08
: 1	TOTAL EXPENDITURES					5673.83
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	IE / OFFICEHOLDER	FORM C/OH
CAMPAIG	N FINANCE REPORT	COVER SHEET PG 1
The C/OH Instruction		COUNT # s Commission Filers) 2 Total pages filed:
3 CANDIDATE/	(MS) MRS / MR FIRST	MI OFFICE USE ONLY
OFFICEHOLDER NAME	KADUI	DEACHUED
	NICKNAME LAST	Date Received LULIVLU
	FORD	JUL 15 2010
4 CANDIDATE/		TATE: ZIP CODE ELECTION OFFICE
OFFICEHOLDER MAILING	100 Commons B) #7-152	7
ADDRESS		Date Hand-derivered or Date Postmarked
Change of Address	DEIPPING SPRINGS, TX 78	8620
5 CANDIDATE/	AREA CODE PHONE NUMBER EX	Receipt # Amount
OFFICEHOLDER PHONE	(512) 922 - 8234	Date Processed
6 CAMPAIGN	MS MRS / MR FIRST	MI
TREASURER		Date Imaged
NAME	NICKNAME LAST	SUFFIX
	STROUD	SOFTIA
7 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CI	TY; STATE; ZIP CODE
TREASURER ADDRESS	14045 Robins Run A	ustin TX 78737
(Residence or Business)	1,1013	ίμ
8 CAMPAIGN	AREA CODE PHONE NUMBER E)	KTENSION
TREASURER		(Carolina)
PHONE	(512) 923-7341	
9 REPORT TYPE	January 15 30th day before election R	Runoff 15th day after campaign treasurer appointment (officeholder only)
	July 15 Sth day before election E	exceeded \$500 limit Final report (Attach C/OH - FR)
10 PERIOD	Month Day Year	Month Day Year
COVERED	THROUGH	6/30/10
11 ELECTION	ELECTION DATE ELECTION TYPE	
	Month Day Year Primary Re	unoff General Special
	11/2/10 Primary R	General Special
12 OFFICE	OFFICE HELD (if any)	OFFICE SOUGHT (if known)
	HAYS COUNTY COMMISSIONEE-POT 4	(same)
14 NOTICE	DIRECT CAMPAIGN EXPENDITURES ARE CAMPAIGN EXPENDITURES MADE	BY OTHERS WITHOUT THE CANDIDATE'S PRIOR CONSENT OR APPROVAL.
OF DIRECT CAMPAIGN	CANDIDATES ARE REQUIRED TO DISCLOSE THIS INFORMATION ONLY IF	
EXPENDITURE	Name	
BY OTHER INDIVIDUALS	Name	
	Address / PO Boy: Ant / Suito # City: State: Tip Code	
	Address / PO Box; Apt. / Suite #; City; State; Zip Code	
additional pages		
	GO TO PAGE 2	

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

				· · · · · · · · · · · · · · · · · · ·		
15 C/OH NAME	KAREN F	, DRD	16	ACCOUNT # (Ethics Commission Filers)		
17 NOTICE FROM POLITICAL COMMITTEE(S)	CANDIDATE / OFFICE	HOLDER. THESE EXPENDITURES MAY HA	AVE BEEN MADE WITHOUT THE CANDIDA	BY POLITICAL COMMITTEES TO SUPPORT THE ATE'S OR OFFICEHOLDER'S KNOWLEDGE OR EY RECEIVE NOTICE OF SUCH EXPENDITURES.		
50 MINUT 1 EE(3)	COMMITTEE TYPE	COMMITTEE NAME				
	GENERAL SPECIFIC	COMMITTEE ADDRESS				
additional pages		COMMITTEE CAMPAIGN TREASURE	R NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRESS				
18 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF ES, LOANS, OR GUARANTEES C		\$ 8		
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 2520.00					
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED \$					
	4. TOTAL	TOTAL POLITICAL EXPENDITURES \$ 3892.13				
CONTRIBUTION BALANCE	1	OLITICAL CONTRIBUTIONS MA ORTING PERIOD	INTAINED AS OF THE LAST DA	\$ 12,115.08		
OUTSTANDING LOAN TOTALS	l '	PRINCIPAL AMOUNT OF ALL OU AY OF THE REPORTING PERIOR		s \$		
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. My COMMISSION EXPERIMENTAL May 28, 2011 Signature of Candidate or Officeholder						
AFFIX NOTARY STAM		ma hii the 4/	many far -			
	()	rson JIMM	certify which, witness my	y hand and seal of office.		
Signature of officer adm	ninistering oath	Printed name of officer a	administering oath	Title of officer administering oath		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS SCHEDULE A — Karen Ford Campaign Barbara Stroud, Treasurer Report Period: 1-1-10 through 6-30-10 Page 1 of 1

## ADDRESS CITY STATE 2IP Contribution Amt 1101 Darden Hill Rd Driftwood TX 78619 100.00 P.O. Box 9269 The Woodlands TX 77387 200.00 13062 Hwy 290 West Austin TX 78737 200.00 TX 78738 100.00 TX 78620 100.00 TX TX 78620 100.00 TX TX 78620 100.00 TX TX 78620 100.00 TX TX TX 78620 100.00 TX	\$350.00		78704	ΤX	Austin	1608 Lightsey Road	Kevin Greenblat Design 1608 Lightsey Road	6/30/10
ADDRESS CITY STATE ZIP Contribution Amt 1101 Darden Hill Rd Driftwood TX 78619 100.00 nn P.O. Box 9269 The Woodlands TX 77387 200.00 sh 13062 Hwy 290 West Austin TX 78736 200.00 4400 Shoalwood Ave Austin TX 78620 100.00 201 W. Fitzhugh Dripping Springs TX 78620 100.00 P.O. Box 1186 Dripping Springs TX 78620 100.00 P.O. Box 1186 Dripping Springs TX 78620 150.00 P.O. Box 1186 Dripping Springs TX 78620 150.00 P.O. Box 1090 Dripping Springs TX 78620 200.00 P.O. Box 1090 Dripping Springs TX 78620 500.00 P.O. Box 1113 Dripping Springs TX 78620 500.00 P.O. Box V Rd Dripping Springs TX 78620 50.00 P.O. Box 1113 Dripping		2,170.00						
### CONTRIBUTION AND CONTRIBUTION AME. 1101 Darden Hill Rd		60.00	78620	ヹ	Dripping Springs	501 Spring Creek Road	Alex Dormont	6/28/10
## ADDRESS CILY STATE ZIP Contribution Amt		60.00	78620	ヹ	Dripping Springs	590 Lost Valley Rd	Newton Hammet	6/28/10
ADDRESS CITY STATE ZIP Contribution Amt 1101 Darden Hill Rd Driftwood TX 78619 100.00 P.O. Box 9269 The Woodlands TX 77387 200.00 13062 Hwy 290 West Austin TX 78737 200.00 4400 Shoalwood Ave Austin TX 78756 100.00 201 W. Fitzhugh Dripping Springs TX 78620 100.00 P.O. Box 1186 Dripping Springs TX 78620 150.00 P.O. Box 1090 San Anotnio TX 78620 100.00 P.O. Box 1090 Dripping Springs TX 78620 500.00 P.O. Box 1113 Dripping Springs TX 78620 500.00 P.O. Box 1113 Dripping Springs TX 78620 500.00		100.00	78620	×	Dripping Springs	Loop 165	Nancy Gilkyson	6/28/10
## ADDRESS CILX STATE ZIP Contribution Amt. 1101 Darden Hill Rd Driftwood TX 78619 100.00 P.O. Box 9269 The Woodlands TX 77387 200.00 13062 Hwy 290 West Austin TX 78737 200.00 4400 Shoalwood Ave Austin TX 78756 100.00 201 W. Fitzhugh Dripping Springs TX 78620 100.00 P. O. Box 1186 Dripping Springs TX 78620 150.00 108 W. Ridgewood Ct San Anotnio TX 78620 100.00 P. O. Box 1090 Dripping Springs TX 78620 200.00 5455 Hwy 290 W Dripping Springs TX 78620 500.00		50.00	78620	¥	Dripping Springs	P. O. Box 1113	Steven Carriker	6/28/10
## ADDRESS CITY STATE ZIP Contribution Amt 1101 Darden Hill Rd Driftwood TX 78619 100.00 P.O. Box 9269 The Woodlands TX 77387 200.00 13062 Hwy 290 West Austin TX 78737 200.00 201 W. Fitzhugh Dripping Springs TX 78620 100.00 P. O. Box 1186 Dripping Springs TX 78620 150.00 P. O. Box 1090 Dripping Springs TX 78620 500.00 500.00 Dripping Springs TX 78620 500.00 500.00 Dripping Springs TX 78620 500.00 500.00 Dripping Springs TX 78620 500.00		150.00	78620	ヹ	Dripping Springs	5455 Hwy 290 W	Harley Clark	6/28/10
## ADDRESS CITY STATE ZIP Contribution Amt 1101 Darden Hill Rd Driftwood TX 78619 100.00 P.O. Box 9269 The Woodlands TX 77387 200.00 13062 Hwy 290 West Austin TX 78737 200.00 4400 Shoalwood Ave Austin TX 78756 100.00 201 W. Fitzhugh Dripping Springs TX 78620 100.00 P. O. Box 1186 Dripping Springs TX 78620 150.00 P. O. Box 1186 Dripping Springs TX 78620 150.00 201 W. Fitzhugh Dripping Springs TX 78620 200.00		500.00	78620	×	Dripping Springs	P. O. Box 1090	Dr. Allie Blair	6/28/10
## ADDRESS CITY STATE ZIP Contribution Amt 1101 Darden Hill Rd Driftwood TX 78619 100.00 P.O. Box 9269 The Woodlands TX 77387 200.00 1 3062 Hwy 290 West Austin TX 78737 200.00 201 W. Fitzhugh Dripping Springs TX 78756 100.00 201 W. Fitzhugh Dripping Springs TX 78620 100.00 P. O. Box 1186 Dripping Springs TX 78620 150.00 P. O. Box 1186 Dripping Springs TX 78620 150.00 P. O. Box 1186 Dripping Springs TX 78620 150.00 TX 78212 100.00		200.00	78620	×	Dripping Springs	201 W. Fitzhugh	Paul Hastings	6/7/10
## ADDRESS CITY STATE ZIP Contribution Amt 1101 Darden Hill Rd Driftwood TX 78619 100.00 P.O. Box 9269 The Woodlands TX 77387 200.00 1 13062 Hwy 290 West Austin TX 78737 200.00 201 W. Fitzhugh Dripping Springs TX 78620 100.00 P. O. Box 1186 Dripping Springs TX 78620 150.00		100.00	78212	×	San Anotnio	108 W. Ridgewood Ct	`Susan Ghertner	6/7/10
## ADDRESS CITY STATE ZIP Contribution Amt 1101 Darden Hill Rd Driftwood TX 78619 100.00 P.O. Box 9269 The Woodlands TX 77387 200.00 13062 Hwy 290 West Austin TX 78737 200.00 4400 Shoalwood Ave Austin TX 78756 100.00 201 W. Fitzhugh Dripping Springs TX 78620 100.00 15100 Hamilton Pool Rd Austin TX 78738 100.00	1 2	150.00	78620	¥	Dripping Springs	P. O. Box 1186	Walter Krudop	5/11/10
IF ADDRESS CITY STATE ZIP Contribution Amt 1101 Darden Hill Rd Driftwood TX 78619 100.00 n P.O. Box 9269 The Woodlands TX 77387 200.00 h 13062 Hwy 290 West Austin TX 78737 200.00 4400 Shoalwood Ave Austin TX 78756 100.00 201 W. Fitzhugh Dripping Springs TX 78620 100.00		100.00	78738	×	Austin	15100 Hamilton Pool Rd	Nelll Penridge	5/11/10
## ADDRESS CITY STATE ZIP Contribution Amt. 1101 Darden Hill Rd Driftwood TX 78619 100.00 P.O. Box 9269 The Woodlands TX 77387 200.00 sh 13062 Hwy 290 West Austin TX 78737 200.00 4400 Shoalwood Ave Austin TX 78756 100.00		100.00	78620	¥	Dripping Springs	201 W. Fitzhugh	Paul Hastings	3/9/10
## ADDRESS CITY STATE ZIP Contribution Amt 1101 Darden Hill Rd Driftwood TX 78619 100.00 en P.O. Box 9269 The Woodlands TX 77387 200.00 sh 13062 Hwy 290 West Austin TX 78737 200.00		100.00	78756	¥	Austin	4400 Shoalwood Ave	Nina Butts	3/9/10
an P.O. Box 9269 The Woodlands TX 77387 Contribution Amt. STATE ZIP Contribution Amt. STATE ZIP Contribution Amt. TX 78619 100.00 TX 77387 200.00		200.00	78737	×	Austin	13062 Hwy 290 West	Charles Thrash	2/9/10
ME ADDRESS CITY STATE ZIP Contribution Amt 1101 Darden Hill Rd Driftwood TX 78619 100.00		200.00	77387	×	The Woodlands	P.O. Box 9269	Tommy Warren	1/26/10
ADURESS CITY STATE ZIP Contribution Amt		100.00	78619	×	Driftwood	1101 Darden Hill Rd	Larry Corwin	1/26/10
	In Kind	Contribution Amt	ZIP	STATE	XIIS	ADDRESS	NAME	DATE

3,892.13					TOTAL EXPENDITURES	
-42.5					event sponsorship	
250		¥	San Marcos		Friends of Family Justice Cntr	6/21/10
					luncheon ticket	
150		ヹ	Austin		Annie's List	4/1/10
500	78620	⇉	DS		Friends of the Pound House Fnd.	3/4/10
!					Advertising, Buckle Series	
300	78620	×	DS		Harrison Ranch Park	3/1/10
					contribution	
150		ス	Austin		Capital Area Council BSA	2/25/10
					tickets for event	
1 00	78620	×	DS		DS UMC Men's Game Dinner	2/21/10
					annual box rental	
156	78620	⇉	DS		The UPS Store	2/20/10
					advertising	
320	78620	×	DS		DS News Dispatch	2/20/10
					advertising	
150	78620	¥	DS		DS Women's Club	2/20/10
					pot for 4-H Youth Show	
750	78620	×	DS		Karen Ford 4-H Buyers Group	1/15/10
					event sponsorship	
500	78620	×	DS		DS Chamber of Commerce	1/14/10
					sign posts and install materials	
262.81	78620	×	DS		Home Depot	1/9/10
					print campaign materials	
289.24		¥	Austin		The Bumper Sticker Store	1/8/10
					copies and notary service	•
14.08	78620	×	DS		The UPS Store	1/4/10
Amt	ZIP	STATE	XII3	ADDRESS	PAYEE	DAILE
						Page 1 of 1
					Report Period: 1-1-10 through 6-30-10	Report Per
					Barbara Stroud, Treasurer	Barbara St
					SCHEDULE F — Karen Ford Campaign	SCHEDUL
					- EVDENDITIONS	DO HICA