

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

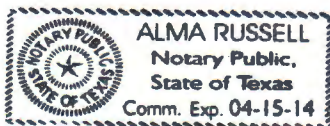
14 C/OH NAME <i>Deborah M. Hunt</i>	15 ACCOUNT # (Ethics Commission Filers)
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16 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> additional pages	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY 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 TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

17 CONTRIBUTION TOTALS EXPENDITURE TOTALS CONTRIBUTION BALANCE OUTSTANDING LOAN TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ <i>1910.00</i>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <i>7933.00</i>
	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ <i>401.22</i>
	4. TOTAL POLITICAL EXPENDITURES	\$ <i>2854.79</i>
	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ <i>6621.29</i>
	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <i>-0-</i>

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.



Deborah M. Hunt

 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said *Deborah M. Hunt*, this the *17th* day of *January*, 20 *12*, to certify which, witness my hand and seal of office.

Alma Russell

 Signature of officer administering oath

Alma Russell

 Printed name of officer administering oath

Notary

 Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <i>1 of 7</i>	
2 FILER NAME <i>Deborah M. Hunt</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>11/10/11</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>C.D. Polumbo</i>	7 Amount of contribution (\$) <i>250.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>7900 Escala Drive Austin, TX 78735</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>11/5/11</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Rod Hortenstine</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>403 Pintail Taylor, TX 76574</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>10/29/11</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>David W. Daniell</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2421 CR 245 Florence, TX 76527</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>10/30/11</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Alma Russell</i>	Amount of contribution (\$) <i>75.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2307 Willow Lane Taylor, TX 76574</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>10/26/11</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Joe B. McMaster</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1400 Vine St. Georgetown TX 78626</i>		(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
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: <i>2 of 7</i>	
2 FILER NAME <i>Deborah M. Hunt</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>11/1/11</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Linda Stewart</i>	7 Amount of contribution (\$) <i>200.00</i>	8 In-kind contribution description (if applicable)
	6 Contributor address; City; State; Zip Code <i>24005 Pedernales Canyon Trail Spicewood, TX 78669</i>	(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>10/25/11</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Terri Romere</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code <i>8004 Borden Springs Cove Austin, TX 78717</i>	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>10/25/11</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Susan Snelson</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code <i>324 Summer Rd. Georgetown, TX 78633</i>	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>10/25/11</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Sharla Resseguie</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code <i>1106 Oliver Loving Cove Cedar Park, TX 78613</i>	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>10/25/11</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Sharon McCarty-McKinnon</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code <i>P.O. Box 524 Comanche, TX 76442</i>	(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
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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:
3 of 7

2 FILER NAME
Deborah M. Hunt

3 ACCOUNT # (Ethics Commission Filers)

4 Date
10/27/11

5 Full name of contributor out-of-state PAC (ID#:
Keith Hagler

6 Contributor address; City; State; Zip Code
**1514 W. Lake Dr.
Taylor, Tx 76574**

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
10/27/11

Full name of contributor out-of-state PAC (ID#:
Craig Morgan

Contributor address; City; State; Zip Code
**3705 Harvey Penick Cove
Round Rock, Tx 78664**

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
10/27/11

Full name of contributor out-of-state PAC (ID#:
Charlie Crossfield

Contributor address; City; State; Zip Code
**309 E. Main Street
Round Rock, Tx 78664**

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
10/26/11

Full name of contributor out-of-state PAC (ID#:
Dan Jones

Contributor address; City; State; Zip Code
**11701 Misty White Dr.
Austin, Tx 78717**

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
10/26/11

Full name of contributor out-of-state PAC (ID#:
Bryant Smith

Contributor address; City; State; Zip Code
**1007 Doral Court
Round Rock, Tx 78664**

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)

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**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 7**

2 FILER NAME
Deborah M. Hunt

3 ACCOUNT # (Ethics Commission Filers)

4 Date: **10/27/11**
5 Full name of contributor out-of-state PAC (ID#: _____):
Harry Gibbs
6 Contributor address; City; State; Zip Code:
**209 So. Church Street
Georgetown, TX 78626**

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: **10/27/11**
Full name of contributor out-of-state PAC (ID#: _____):
Steve Randall
Contributor address; City; State; Zip Code:
**P.O. Box 728
Hutto, TX 78634**

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: **10/27/11**
Full name of contributor out-of-state PAC (ID#: _____):
Juli Eivens
Contributor address; City; State; Zip Code:
**10500 Avery Club Dr. #15
Austin, TX 78717**

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: **10/27/11**
Full name of contributor out-of-state PAC (ID#: _____):
Patty Bond
Contributor address; City; State; Zip Code:
**11701 Hardwood Trail
Austin, TX 78750**

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: **10/27/11**
Full name of contributor out-of-state PAC (ID#: _____):
Margret Wingrove
Contributor address; City; State; Zip Code:
**14932 Thatcher Drive
Austin, TX 78717**

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
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:

5 of 7

2 FILER NAME

Deborah M. Hunt

3 ACCOUNT # (Ethics Commission Filers)

4 Date

10/27/11

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

Joseph Pondrom

6 Contributor address; City; State; Zip Code

306 River Ridge Dr.
Georgetown, Tx 78628

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

10/27/11

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

Joe Baker

Contributor address; City; State; Zip Code

959 Blue Spring Cove
Round Rock, TX 78681

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

10/26/11

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

Harvey Allen

Contributor address; City; State; Zip Code

1202 Prosperity Hills Dr.
Georgetown, TX 78628

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

10/18/11

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

Kathryn Hunt

Contributor address; City; State; Zip Code

5338 Tamango Way
Austin, Tx 78749

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

10/17/11

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

Jean Brashear

Contributor address; City; State; Zip Code

2955 Dawn Drive Suite B
Georgetown, Tx 78628

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

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: <i>6 of 7</i>	
2 FILER NAME <i>Deborah M. Hunt</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>11/19/11</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Charles W. Stover</i>	7 Amount of contribution (\$) <i>100.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>31006 Clearwater Court Georgetown, TX 78628</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>10/18/11</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Roger Busfield</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>P.O. Box 2267 Georgetown, TX 78627</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>10/16/11</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Charles Schwertner</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>101 Spearpoint Cove Georgetown, TX 78628</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>10/17/11</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Edmond S. Komandosky</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2209 Gladnell Taylor, TX 76574</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>10/18/11</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Nancy Rabb</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2604 Sunrise Rd. Round Rock, TX 78664</i>		(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
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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <i>7 of 7</i>	
2 FILER NAME <i>Deborah M. Hunt</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>10/17/11</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Glenna Hodge</i>	7 Amount of contribution (\$) <i>250.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>1705 County Road 201 Burnet, TX 78611</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>10/17/11</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Sherron Snead</i>	Amount of contribution (\$) <i>200.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>3006 Gabriel View Dr. Georgetown, TX 78628</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>10/27/11</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Nyle Maxwell</i>	Amount of contribution (\$) <i>598.00</i>	In-kind contribution description (if applicable) <i>Re-election Campaign Party</i>
Contributor address; City; State; Zip Code <i>3400 Vintage Drive Round Rock Texas 78664</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(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
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

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:	2 FILER NAME <i>Deborah M. Hunt</i>	3 ACCOUNT # (Ethics Commission Filers)
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4 Date <i>10/14/11</i>	5 Payee name <i>Minute Man Press</i>
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6 Amount (\$) <i>152.60</i>	7 Payee address; City; State; Zip Code <i>1011 Leander Rd. Georgetown, TX 78628</i>
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Printing Expenses</i>	(b) Description (If travel outside of Texas, complete Schedule T) <i>mailer & name badge</i>
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date <i>10/7/11</i>	Payee name <i>Minute Mail Press</i>
------------------------	--

Amount (\$) <i>365.00</i>	Payee address; City; State; Zip Code <i>1011 Leander Rd. Georgetown, TX 78628</i>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Printing Expenses</i>	Description (If travel outside of Texas, complete Schedule T) <i>mailer & stickers</i>
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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 <i>10/18/11</i>	Payee name <i>Minute Mail Press</i>
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Amount (\$) <i>415.34</i>	Payee address; City; State; Zip Code <i>1011 Leander Rd. Georgetown, TX 78628</i>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Printing Expenses</i>	Description (If travel outside of Texas, complete Schedule T) <i>mailer</i>
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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 <i>10/26/11</i>	Payee name <i>Korey Howell Photography</i>
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Amount (\$) <i>270.63</i>	Payee address; City; State; Zip Code <i>9707 Anderson Mill Road #310 Austin, Texas 78750</i>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Advertising Expense</i>	Description (If travel outside of Texas, complete Schedule T) <i>photograph</i>
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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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:	2 FILER NAME <i>Deborah M. Hunt</i>	3 ACCOUNT # (Ethics Commission Filers)
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4 Date <i>11/28/11</i>	5 Payee name <i>Williamson County Republican Primary</i>
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6 Amount (\$) <i>1,250.00</i>	7 Payee address; City; State; Zip Code <i>2915 Pioneer Way Round Rock, Texas 78664</i>
---	--

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Fees</i>	(b) Description (If travel outside of Texas, complete Schedule T) <i>Filing Fee</i>
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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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)
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED