

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00090192	2 Total pages filed: 25	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST Kathryne	MI	<b>OFFICE USE ONLY</b>  Date Received ELECTRONICALLY FILED 02/02/2026	
	NICKNAME Kathie	LAST Tovo		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 809 West 32nd Street  Austin, TX 78705		Date Hand-delivered or Date Postmarked	
			Receipt #	Amount
			Date Processed	
			Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST Ann E.	MI		
	NICKNAME Kitchen	LAST Kitchen	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2136 Antone Street  Austin, TX 78723			
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 228-1645			
8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)			
9 PERIOD COVERED	Month Day Year    THROUGH    Month Day Year 01/01/2026    01/22/2026			
10 ELECTION	ELECTION DATE Month Day Year 03/03/2026		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any) State Representative District 49 Travis		12 OFFICE SOUGHT (if known) State Representative District 49	

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

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<b>13 C / OH NAME</b> Tovo, Kathrynne	<b>14 Filer ID</b> (Ethics Commission Filers) 00090192
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<b>15 NOTICE FROM POLITICAL COMMITTEE(S)</b>  <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. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.		
	<b>COMMITTEE TYPE</b>	<b>COMMITTEE NAME</b>	
	<input type="checkbox"/> GENERAL	<b>COMMITTEE ADDRESS</b>	
	<input type="checkbox"/> SPECIFIC		
	<b>COMMITTEE CAMPAIGN TREASURER NAME</b>		
<b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>			

<b>16 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 30,465.00
----- <b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	\$ 24,750.01
----- <b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 77,358.64
----- <b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

**17 AFFIDAVIT**

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

Kathryne Tovo  
\_\_\_\_\_  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
Signature of officer administering      Printed name of officer administering      Title of officer administering oath

**SUBTOTALS - C/OH****FORM C/OH  
COVER SHEET PG 3**

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<b>18 FILER NAME</b> Tovo, Kathrynne		<b>19 Filer ID</b> (Ethics Commission Filers) 00090192
<b>20 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 30,465.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 24,738.45
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 11.56
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/15 Rpt: 4/25
<b>2</b> FILER NAME Tovo, Kathryn		<b>3</b> Filer ID (Ethics Commission Filers) 00090192
<b>4</b> Date 01/20/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abelson, Michael <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78701	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Mgmt Consultant		<b>9</b> Employer (See Instructions) The Abelson Group
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alter, Alison <hr/> Contributor address; City; State; Zip Code  Austin, TX 78756	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) Social Impact Advisor		Employer (See Instructions) Alter Advising LLC
Date 01/21/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anschutz, Kent <hr/> Contributor address; City; State; Zip Code  AUSTIN, TX 78701	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 01/21/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anthony, Dana <hr/> Contributor address; City; State; Zip Code  Austin, TX 78705	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armstrong, William <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions) Property		Employer (See Instructions) Stratus

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/15 Rpt: 5/25
<b>2</b> FILER NAME Tovo, Kathryn		<b>3</b> Filer ID (Ethics Commission Filers) 00090192
<b>4</b> Date 01/19/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ashmun, Anne <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78703	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) Rancher		<b>9</b> Employer (See Instructions) Self
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atherton, Lorraine <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Copy editor		Employer (See Instructions) Self
Date 01/19/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Linda <hr/> Contributor address; City; State; Zip Code  Austin, TX 78730-3355	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belknap, David <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Biedrzycki, Carol <hr/> Contributor address; City; State; Zip Code  Austin, TX 78758	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/15 Rpt: 6/25
<b>2</b> FILER NAME Tovo, Kathrynne		<b>3</b> Filer ID (Ethics Commission Filers) 00090192
<b>4</b> Date 01/22/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blazer, Emily <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78757	<b>7</b> Amount of Contribution (\$)  \$35.00
<b>8</b> Principal occupation / Job title (See Instructions) retired systems analyst		<b>9</b> Employer (See Instructions) Teacher Retirement System
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonar, Ave <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyle, Carolyn and Jim <hr/> Contributor address; City; State; Zip Code  Austin, TX 78731	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butler, Christopher and Sueann Kenmotsu <hr/> Contributor address; City; State; Zip Code  AUSTIN, TX 78756-3510	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 01/03/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAIG, RICHARD <hr/> Contributor address; City; State; Zip Code  AUSTIN, TX 78703	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/15 Rpt: 7/25
<b>2</b> FILER NAME Tovo, Kathryne		<b>3</b> Filer ID (Ethics Commission Filers) 00090192
<b>4</b> Date 01/09/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cobb, Gary <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78701	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Self
Date 01/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crawford, Lee <hr/> Contributor address; City; State; Zip Code  The Hills, TX 78738	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) General Counsel		Employer (See Instructions) Austin Transit Partnership
Date 01/21/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dial, Susan <hr/> Contributor address; City; State; Zip Code  Austin, TX 78756	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunn, Beverly <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunn, Beverly <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/15 Rpt: 8/25
<b>2</b> FILER NAME Tovo, Kathryne		<b>3</b> Filer ID (Ethics Commission Filers) 00090192
<b>4</b> Date 01/21/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Jim <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78716	<b>7</b> Amount of Contribution (\$)  \$300.00
<b>8</b> Principal occupation / Job title (See Instructions) Civil Engineer		<b>9</b> Employer (See Instructions) Retired
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Jim <hr/> Contributor address; City; State; Zip Code  Austin, TX 78716	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) Civil Engineer		Employer (See Instructions) Retired
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erickson, Emily <hr/> Contributor address; City; State; Zip Code  Austin, TX 78705	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Nonprofit operations		Employer (See Instructions) Waterloo Greenway Conservancy
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eubanks, Ted <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Planner		Employer (See Instructions) Ted Lee Eubanks
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fagan, Dennis <hr/> Contributor address; City; State; Zip Code  Austin, TX 78705	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Video Producer		Employer (See Instructions) Dennis Fagan



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/15 Rpt: 9/25
<b>2</b> FILER NAME Tovo, Kathryne		<b>3</b> Filer ID (Ethics Commission Filers) 00090192
<b>4</b> Date 01/14/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frensley, Nathalie <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78756	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frensley, Nathalie <hr/> Contributor address; City; State; Zip Code  Austin, TX 78756	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaudini, Michael <hr/> Contributor address; City; State; Zip Code  Narberth, PA 19072	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Armbrust & Brown PLLC
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geisler, Marie <hr/> Contributor address; City; State; Zip Code  Austin, TX 78759	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, William S <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Real estate appraiser		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/15 Rpt: 10/25
<b>2</b> FILER NAME Tovo, Kathrynne		<b>3</b> Filer ID (Ethics Commission Filers) 00090192
<b>4</b> Date 01/17/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harden, Joi <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78758	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>8</b> Principal occupation / Job title (See Instructions) City Planner		<b>9</b> Employer (See Instructions) City of Austin
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, August <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Moreland Properties
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hatfield, Richard <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/02/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayes, Nicole <hr/> Contributor address; City; State; Zip Code  Austin, TX 78735	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Platform science
Date 01/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heyburn, Kevin <hr/> Contributor address; City; State; Zip Code  Austin, TX 78751	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/15 Rpt: 11/25
<b>2</b> FILER NAME Tovo, Kathrynne		<b>3</b> Filer ID (Ethics Commission Filers) 00090192
<b>4</b> Date 01/14/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoffman, Courtney <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78731	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 01/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubbard, Ron <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Khataw, Ali R. <hr/> Contributor address; City; State; Zip Code  Austin, TX 78746	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Ali Khataw Photography
Date 01/21/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kitchen, Ann <hr/> Contributor address; City; State; Zip Code  Austin, TX 78723	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loewy, Adam <hr/> Contributor address; City; State; Zip Code  Austin, TX 78731	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions) Law		Employer (See Instructions) Loewy Law Firm

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/15 Rpt: 12/25
<b>2</b> FILER NAME Tovo, Kathryne		<b>3</b> Filer ID (Ethics Commission Filers) 00090192
<b>4</b> Date 01/19/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marchbanks, Hilary <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78727	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Pastor		<b>9</b> Employer (See Instructions) United Methodist
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Massey, Pat <hr/> Contributor address; City; State; Zip Code  Austin, TX 78723	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Chasesource
Date 01/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayton, Emma L <hr/> Contributor address; City; State; Zip Code  AUSTIN, TX 78757-2117	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 01/21/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCready Heinen, Anne <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Gayle <hr/> Contributor address; City; State; Zip Code  Austin, TX 78751	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/15 Rpt: 13/25
<b>2</b> FILER NAME Tovo, Kathrynne		<b>3</b> Filer ID (Ethics Commission Filers) 00090192
<b>4</b> Date 01/20/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moffat, Susan <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78751	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 01/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Myhr, Mitylene <hr/> Contributor address; City; State; Zip Code  Austin, TX 78751	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) St. Edward's University
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neal, John Scott <hr/> Contributor address; City; State; Zip Code  Austin, TX 78731	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Asset Managment		Employer (See Instructions) John S Neal
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orillion, Kathleen <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Chief reviewer		Employer (See Instructions) Texas Legislative Council
Date 01/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paup, Karen <hr/> Contributor address; City; State; Zip Code  Austin, TX 78722	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/15 Rpt: 14/25
<b>2</b> FILER NAME Tovo, Kathryn		<b>3</b> Filer ID (Ethics Commission Filers) 00090192
<b>4</b> Date 01/20/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paup, Karen <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78722	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Penn, Gary <hr/> Contributor address; City; State; Zip Code  Austin, TX 78751	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 01/04/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Alicia <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Philipson, Carol <hr/> Contributor address; City; State; Zip Code  Austin, TX 78750	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Carol Philipson
Date 01/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pickle, Peggy J. <hr/> Contributor address; City; State; Zip Code  AUSTIN, TX 78703-4872	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/15 Rpt: 15/25
<b>2</b> FILER NAME Tovo, Kathrynne		<b>3</b> Filer ID (Ethics Commission Filers) 00090192
<b>4</b> Date 01/21/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piper, William <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78704	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reckson, Paula <hr/> Contributor address; City; State; Zip Code  Austin, TX 78723	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Joseph <hr/> Contributor address; City; State; Zip Code  Austin, TX 78731	Amount of Contribution (\$)  \$300.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ritts, Jim <hr/> Contributor address; City; State; Zip Code  Austin, TX 78702	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Exec Director		Employer (See Instructions) ATA
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruiz, James <hr/> Contributor address; City; State; Zip Code  Austin, TX 78759	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Winstead PC

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/15 Rpt: 16/25
<b>2</b> FILER NAME Tovo, Kathryn		<b>3</b> Filer ID (Ethics Commission Filers) 00090192
<b>4</b> Date 01/22/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, Robin <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78704	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 01/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seeger, Patricia <hr/> Contributor address; City; State; Zip Code  Austin, TX 78750	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swan, Laurie <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Stratus Properties
Date 01/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Denis <hr/> Contributor address; City; State; Zip Code  Austin, TX 78752	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Programmer		Employer (See Instructions) University of Texas at Austin
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tipps, Lisa <hr/> Contributor address; City; State; Zip Code  Austin, TX 78739	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 14/15 Rpt: 17/25
<b>2</b> FILER NAME Tovo, Kathryn		<b>3</b> Filer ID (Ethics Commission Filers) 00090192
<b>4</b> Date 01/20/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Todd, Wendy <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78704	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Community Advocate		<b>9</b> Employer (See Instructions) Self-employed
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trejo, Deborah <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) Kemp Smith LLP
Date 01/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Viktorin, Richard <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Semi-retired workitude		Employer (See Instructions) Richard Viktorin
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wahlberg, P David <hr/> Contributor address; City; State; Zip Code  Austin, TX 78731	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Sr. district judge		Employer (See Instructions) Texas
Date 01/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waley, Roy <hr/> Contributor address; City; State; Zip Code  Austin, TX 78756	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 15/15 Rpt: 18/25
<b>2</b> FILER NAME Tovo, Kathrynne		<b>3</b> Filer ID (Ethics Commission Filers) 00090192
<b>4</b> Date 01/21/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weeks, Allen <hr/> <b>6</b> Contributor address; City; State; Zip Code  Charlottesville, VA 22911	<b>7</b> Amount of Contribution (\$)  \$150.00
<b>8</b> Principal occupation / Job title (See Instructions) Non-profit executive		<b>9</b> Employer (See Instructions) Austin Voices for Education and Youth
Date 01/21/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weigand, Ingrid <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Non-Profit Foundaiton
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkinson, Julia <hr/> Contributor address; City; State; Zip Code  Austin, TX 78705	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Peggy <hr/> Contributor address; City; State; Zip Code  Austin, TX 78759	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Sr IT Auditor		Employer (See Instructions) Texas Mutual Insurance Company

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/6 Rpt: 19/25	<b>2</b> FILER NAME Tovo, Kathrynne	<b>3</b> Filer ID (Ethics Commission Filers) 00090192
<b>4</b> Date 01/12/2026	<b>5</b> Payee name Alemao, Andrew	
<b>6</b> Amount (\$) \$2,478.42	<b>7</b> Payee address; City; State; Zip Code  <b>REDACTED PER 254.0401, ELEC. CODE</b> Austin, TX 78756	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense salary
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/21/2026	Payee name Allandale Neighbor	
Amount (\$) \$225.00	Payee address; City; State; Zip Code 3129 Rippling Creek Ct  Austin, TX 78732	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense advertisement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/08/2026	Payee name Biberk Insurance	
Amount (\$) \$59.73	Payee address; City; State; Zip Code 1314 Douglas Street Suite 1400 Omaha, NE 68102	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Insurance payment
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/6 Rpt: 20/25	<b>2</b> FILER NAME Tovo, Kathrynne	<b>3</b> Filer ID (Ethics Commission Filers) 00090192
<b>4</b> Date 01/12/2026	<b>5</b> Payee name Dunn, Rachel	
<b>6</b> Amount (\$) \$486.46	<b>7</b> Payee address; City; State; Zip Code  <b>REDACTED PER 254.0401, ELEC. CODE</b> Austin, TX 78748	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense salary
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/12/2026	Payee name Dunn, Soria	
Amount (\$) \$736.17	Payee address; City; State; Zip Code  <b>REDACTED PER 254.0401, ELEC. CODE</b> Austin, TX 78756	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense salary
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/12/2026	Payee name GUSTO	
Amount (\$) \$1,615.50	Payee address; City; State; Zip Code 525 20TH STREET  SAN FRANCISCO, CA 94107	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense payroll taxes
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 3/6 Rpt: 21/25	<b>2</b> FILER NAME Tovo, Kathrynne	<b>3</b> Filer ID (Ethics Commission Filers) 00090192
<b>4</b> Date 01/14/2026	<b>5</b> Payee name Hernandez Wick Campaigns, LLC	
<b>6</b> Amount (\$) \$15,000.00	<b>7</b> Payee address; City; State; Zip Code 11002 Point Clear Court  Austin, TX 78747	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) consulting	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense consulting services
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/21/2026	Candidate/Officeholder name Payee name Jolene Kiobassa	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 3007 West Ave  Austin, TX 78705	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/05/2026	Candidate/Officeholder name Payee name Mailchimp	
Amount (\$) \$79.95	Payee address; City; State; Zip Code 675 Ponce De Leon Avenue Northeast Suite 5000 Atlanta, GA 30308	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense email marketing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 4/6 Rpt: 22/25	<b>2</b> FILER NAME Tovo, Kathrynne	<b>3</b> Filer ID (Ethics Commission Filers) 00090192
<b>4</b> Date 01/21/2026	<b>5</b> Payee name North University Neighborhood Association	
<b>6</b> Amount (\$) \$100.00	<b>7</b> Payee address; City; State; Zip Code 103 W 33rd St  Austin, TX 78705	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense advertisement
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/12/2026	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$1,095.20	Payee name Ochoa, Phillip  Payee address; City; State; Zip Code <b>REDACTED PER 254.0401, ELEC. CODE</b> Austin, TX 78724	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense salary
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/21/2026	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$190.00	Payee name Pecan Press  Payee address; City; State; Zip Code PO Box 49427  Austin, TX 78765	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense advertisement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 5/6 Rpt: 23/25	<b>2</b> FILER NAME Tovo, Kathrynne	<b>3</b> Filer ID (Ethics Commission Filers) 00090192
<b>4</b> Date 01/13/2026	<b>5</b> Payee name Spectrum	
<b>6</b> Amount (\$) \$138.92	<b>7</b> Payee address; City; State; Zip Code 1000 E 41st  Austin, TX 78705	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense internet
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/15/2026	Payee name Stockdale Family Partnership LLC	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 2414 Exposition Blvd  Austin, TX 78703	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) rent	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/15/2026	Payee name Stockdale Family Partnership LLC	
Amount (\$) \$354.84	Payee address; City; State; Zip Code 2414 Exposition Blvd  Austin, TX 78703	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) rent	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/6 Rpt: 24/25	2 FILER NAME Tovo, Kathrynne	3 Filer ID (Ethics Commission Filers) 00090192
4 Date 01/12/2026	5 Payee name Trabulsy, Noel	
6 Amount (\$) \$678.26	7 Payee address; City; State; Zip Code <div>REDACTED PER 254.0401, ELEC. CODE</div> Austin, TX 78745	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense salary
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

**SCHEDULE G**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule G: Sch: 1/1 Rpt: 25/25	<b>2</b> FILER NAME Tovo, Kathrynne	<b>3</b> Filer ID (Ethics Commission Filers) 00090192
<b>4</b> Date 01/06/2026	<b>5</b> Payee name Austin Creative Reuse	
<b>6</b> Amount (\$) \$11.00  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code 2005 Wheless Lane  Austin, TX 78723	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supplies
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/17/2026	Payee name Austin Creative Reuse	
Amount (\$) \$0.56  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 2005 Wheless Lane  Austin, TX 78723	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held