(512) 463-5800 1-800-325-8506

## CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT**

## FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	duide explains how to complete this form.	1 ACCOUNT# (Ethics Commission filers)	2 Total pages filed:		
3 CANDIDATE/	MS / MRS / MR FIRST	MI	OFFICE USE ONLY		
OFFICEHOLDER	Mrs Tamala		OFFICE USE ONLY		
NAME	NVS Tamala LAST	SUFFIX	Date Received		
	Barksdala	e			
4 CANDIDATE/	ADDRESS / PO BOX; APT / SUITE #; C	SITY; STATE; ZIP CODE			
OFFICEHOLDER MAILING	10711 Jonwood Auso	hill TX Densa			
ADDRESS	10111 302000	10 10 100	Date Hand-delivered or Date Postmarked		
Change of Address					
5 CANDIDATE/	AREA CODE PHONE NUMBER	EXTENSION			
OFFICEHOLDER	1612 1202 455		Receipt # Amount		
PHONE	(512) 297-4885		Date Processed		
6 CAMPAIGN	MS / MRS / MR FIRST	MI			
TREASURER NAME	MS Melesse		Date Imaged		
IVAIVIL	Λ				
	Rodriguez				
7 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE);		ZIP CODE		
TREASURER ADDRESS	800 W. 38th St. A	lat 1200 Austi	N TX 787011		
(Residence or business)	300 000 1	ipa (100).	10 104		
8 CAMPAIGN	AREA CODE PHONE NUMBER	EXTENSION			
TREASURER PHONE	(210) 836-6700				
9 REPORTTYPE	January 15 30th day before election	n Runoff	15th day after campaign treasurer appointment (officeholder only)		
	July 15 8th day before election	Exceeded \$500 limit	Final report (Attach C/OH - FR)		
10 PERIOD	Month Day Year	Month Day	Year		
COVERED	7/16/11 THROI	Of /15	/12		
11 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year	PE			
	Primary		General Special		
12 OFFICE	AUSTIN IND School District	13 OFFICE SOUGHT (if knows	1)		
	AUSTIN IN Shoot District	Tuster			
14 NOTICE					
OF DIRECT	<ul> <li>Direct campaign expenditures are campaign of Candidates are required to disclose this informat</li> </ul>	expenditures made by others without tion only if they receive notification of	the candidate's prior consent or approval. the direct campaign expenditure.		
CAMPAIGN EXPENDITURE					
BY OTHER	Name				
INDIVIDUALS					
	Address / PO Box; Apt. / Suite #; City; State; Z	Zip Code			
additional pages					
GO TO PAGE 2					

## CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

44.03033333					
14 C/OH NAME	MALA	BARKSDALE	15 ACCOUNT # (Ethics Commission Filers)		
16 NOTICE FRÖM POLITICAL COMMITTEE(S)	CANDIDATE / OFFICEHOLDER THESE EXPENDITURES MAY HAVE DESIGNATED BY POLITICAL COMMITTEES TO SUPPORT THE				
	COMMITTEE TYPE	COMMITTEE NAME			
1105	SPECIFIC	COMMITTEE ADDRESS			
		COMMITTEE CAMPAIGN TREASURER NAME			
additional pages			.,		
		COMMITTEE CAMPAIGN TREASURER ADDRESS			
17 CONTRIBUTION TOTALS	1. TOTAL I PLEDGE	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN SES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED			
	2. TOTAL (OTHER	POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$		
EXPENDITURE TOTALS  3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		IIZED \$			
	4. TOTAL	POLITICAL EXPENDITURES	\$		
CONTRIBUTION BALANCE	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY     OF REPORTING PERIOD		* 715.44		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$				
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.  SYRALJA L. POLLOCK Notary Public, State of Texas My Commission Expires April 01, 2012  Signature of Candidate or Officeholder					
AFFIX NOTARY STAMP / SEAL ABOVE					
Sworn to and subscribed before me, by the said					
Anglic & Rollect Stratic Pollock Notars Poblic					
Signature of officer administering oath  Printed name of officer administering oath  Title of officer administering oath					