

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME Limberg, Kim (Mrs.)

15 ACCOUNT # (Ethics Commission filers)
00065536

16 NOTICE FROM POLITICAL COMMITTEE(S)

.. This box is for notice of political expenditures 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

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

17 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$ 0.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 200.00

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED \$ 0.00

4. TOTAL POLITICAL EXPENDITURES \$ 3,079.34

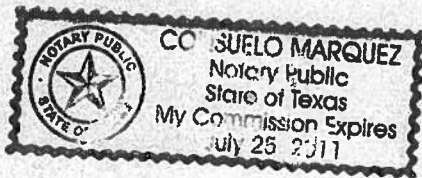
CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 78.41

OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 0.00

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.

Kim Carol Limberg
Signature of Candidate or Officeholder *April 8, 2010*

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Kim Carol Limberg, this the 8th day of April, 2010, to certify which, witness my hand and seal of office.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 1/1 Report: 3/9

2 FILER NAME Limberg, Kim (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00065536

4 Date

02/21/2010

5 Full name of contributor out-of-state PAC (ID# _____)
Zavala, Sandra (Mrs.)

6 Contributor address; City; State; Zip Code
Irving, TX 75062

7 Amount of contribution (\$)

\$200.00

8 In-kind contribution description (if applicable)

Photography for Campaign Fundraiser

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)
Photographer

10 Employer (See Instructions)
Sears

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/1 Report: 4/9

2 FILER NAME Limberg, Kim (Mrs.)

3 ACCOUNT # (Ethics Commission filers)
00065536

4 Date

02/23/2010

5 Payee name
Limberg, Kim (Mrs.)

6 Payee address; City; State; Zip Code
1910 Cartwright St.
Irving, TX 75062

7 Amount
(\$)

\$815.39

8 Purpose of payment (See instructions regarding type of information required.)
Reimbursement for Postage 02/12/2010

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

(If travel outside of Texas, complete Schedule T)

Office sought:
Office held:

Date

03/08/2010

Payee name
Tucker, Chad (Mr.)

Payee address; City; State; Zip Code
3123 W. Walnut Hill Ln.
Apt. 2087
Irving, TX 75038

Amount
(\$)

\$112.50

Purpose of payment (See instructions regarding type of information required.)
Campaign Services - Sign placement & pickup

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

(If travel outside of Texas, complete Schedule T)

Office sought:
Office held:

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/5 Report: 5/9
2 FILER NAME Limberg, Kim (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00065536
4 Date	5 Payee name 21st Century Democrats	8 Amount (\$) \$10.00
03/12/2010	6 Payee address; City; State; Zip Code 1731 Connecticut Ave, NW 2nd Floor Washington, DC 20009	<input type="checkbox"/> Reimbursement from political contributions intended
	7 Purpose of expenditure (See instructions regarding type of information required.) Donation (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Date	Payee name Constant Contact	Amount (\$) \$31.88
03/15/2010	Payee address; City; State; Zip Code 1601 Trapelo Rd. Suite 329 Waltham, MA 02451	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
	Purpose of expenditure (See instructions regarding type of information required.) Email service (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Date	Payee name Dallas County Elections Dept.	Amount (\$) \$10.65
03/25/2010	Payee address; City; State; Zip Code 2377 Stemmons Frwy Suite 820 Dallas, TX 75207	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
	Purpose of expenditure (See instructions regarding type of information required.) Voter Data (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Date	Payee name Demcratic National Committee	Amount (\$) \$15.00
02/21/2010	Payee address; City; State; Zip Code 430 South Capitol Street, SE Washington, DC 20003	<input type="checkbox"/> Reimbursement from political contributions intended
	Purpose of expenditure (See instructions regarding type of information required.) Donation (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Date	Payee name El Chico	Amount (\$) \$134.69
03/02/2010	Payee address; City; State; Zip Code 2305 W. Airport Freeway Irving, TX 75062	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
	Purpose of expenditure (See instructions regarding type of information required.) Food for Campaign Workers (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 2/5 Report: 6/9

2 FILER NAME Limberg, Kim (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00065536

4 Date	5 Payee name	8 Amount (\$)
02/26/2010	Family Dollar Payee address; City; State; Zip Code Irving, TX 75061	\$7.58
	7 Purpose of expenditure (See instructions regarding type of information required.) Rain panchos (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
03/20/2010	Go Daddy Payee address; City; State; Zip Code 14455 N. Hayden Rd. Suite 219 Scottsdale, AZ 85260	\$29.99
	Purpose of expenditure (See instructions regarding type of information required.) Domain names and Security (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
02/24/2010	Hightech Signs Payee address; City; State; Zip Code 220 N. Story Rd. #101 Irving, TX 75061-6774	\$292.28
	Purpose of expenditure (See instructions regarding type of information required.) Large signs (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
03/12/2010	Hightech Signs Payee address; City; State; Zip Code 220 N. Story Rd. #101 Irving, TX 75061-6774	\$541.23
	Purpose of expenditure (See instructions regarding type of information required.) Stickers (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
03/01/2010	Kustom Kwik Print Payee address; City; State; Zip Code 2233 E. Grauwlyer Rd. Ste 123 Irving, TX 75061-3239	\$129.90
	Purpose of expenditure (See instructions regarding type of information required.) Printing Service (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 3/5 Report: 7/9

2 FILER NAME Limberg, Kim (Mrs.)

3 ACCOUNT #

(Ethics Commission filers)

00065536

4 Date	5 Payee name	8 Amount (\$)
02/28/2010	La Madeleine Corporation 6 Payee address; City; State; Zip Code 6430 N. MacArthur Blvd Irving, TX 75039	\$24.89
	7 Purpose of expenditure (See instructions regarding type of information required.) Food for Campaign Workers (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
02/26/2010	Payee name Long John Silver's Payee address; City; State; Zip Code 400 W. Irving Blvd. Irving, TX 75060	\$27.45
	Purpose of expenditure (See instructions regarding type of information required.) Food for Campaign workers (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
02/24/2010	Payee name Lowe's Payee address; City; State; Zip Code 3500 W. Airport Frwy Irving, TX 75062	\$95.88
	Purpose of expenditure (See instructions regarding type of information required.) Materials for large sign supports (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
02/27/2010	Payee name Office Depot Payee address; City; State; Zip Code 1000 W. Airport Frwy Irving, TX 75061	\$16.23
	Purpose of expenditure (See instructions regarding type of information required.) Printer Ink (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
03/02/2010	Payee name Robodial.Org, LLP Payee address; City; State; Zip Code P.O. Box 1393 Media, PA 19063	\$115.00
	Purpose of expenditure (See instructions regarding type of information required.) Robo calls (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/5 Report: 8/9
2 FILER NAME Limberg, Kim (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00065536
4 Date 03/02/2010	5 Payee name Robodial.Org, LLP 6 Payee address; City; State; Zip Code P.O. Box 1393 Media, PA 19063 7 Purpose of expenditure (See instructions regarding type of information required.) Robo calls (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	8 Amount (\$) \$3.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 03/10/2010	Payee name Sierra Club Payee address; City; State; Zip Code 408 C Street, NE Washington, DC 20002 Purpose of expenditure (See instructions regarding type of information required.) Donation (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	Amount (\$) \$10.00 <input type="checkbox"/> Reimbursement from political contributions intended
Date 03/02/2010	Payee name Subway Sandwiches & Salads Payee address; City; State; Zip Code 1105 Coker Irving, TX 75062 Purpose of expenditure (See instructions regarding type of information required.) Food for Campaign Workers (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	Amount (\$) \$43.84 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 02/26/2010	Payee name Tom Thumb Payee address; City; State; Zip Code 4010 N MacArthur Blvd Irving, TX 75038 Purpose of expenditure (See instructions regarding type of information required.) Food for Campaign Workers (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	Amount (\$) \$16.96 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 02/23/2010	Payee name Washington, Ivan (Mr.) Payee address; City; State; Zip Code 8821 Valley Ranch Pkwy, East Apt. 327 Irving, TX 75063 Purpose of expenditure (See instructions regarding type of information required.) Campaign Services - Place & Pickup signs, poll work (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	Amount (\$) \$200.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 5/5 Report: 9/9

2 FILER NAME Limberg, Kim (Mrs.)

3 ACCOUNT #

(Ethics Commission filers)

00065536

4 Date	5 Payee name Washington, Ivan (Mr.)	8 Amount (\$)
02/23/2010	<p>6 Payee address; City; State; Zip Code 8821 Valley Ranch Pkwy, East Apt. 327 Irving, TX 75063</p>	\$285.00
	<p>7 Purpose of expenditure (See instructions regarding type of information required.) Campaign Services - Place & Pickup signs, poll work</p> <p>(If travel outside of Texas, complete Schedule T) <input type="checkbox"/></p>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
03/03/2010	<p>Payee name Washington, Ivan (Mr.)</p> <p>Payee address; City; State; Zip Code 8821 Valley Ranch Pkwy, East Apt. 327 Irving, TX 75063</p>	\$110.00
	<p>Purpose of expenditure (See instructions regarding type of information required.) Campaign Services - Place & Pickup signs, poll work</p> <p>(If travel outside of Texas, complete Schedule T) <input type="checkbox"/></p>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended