

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

3833

**FORM C/OH  
COVER SHEET 1**

The C/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers)	2 Total pages filed: <b>FEB 9 4 44 PM '98</b> DANA H. COOPER COUNTY CLERK TRAVIS COUNTY, TEXAS OFFICE USE ONLY DATE RECEIVED FEB 9 4 44 PM '98 FILED COUNTY CLERK TRAVIS COUNTY, TEXAS
3 CANDIDATE / OFFICEHOLDER NAME	TITLE <b>Mr.</b> NICKNAME	FRST <b>Todd</b> LAST	MI <b>A</b> SUFFIX
4 CANDIDATE / OFFICEHOLDER ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX:	APT / SUITE #:	CITY: STATE: ZIP CODE
5 CAMPAIGN TREASURER NAME	TITLE <b>Mr.</b> NICKNAME	FRST <b>Frank</b> LAST	MI <b>✓</b> SUFFIX
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY: STATE: ZIP CODE		
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
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 \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
9 PERIOD COVERED	Month Day Year    THROUGH    Month Day Year <b>1 / 1 / 98</b> <b>1 / 29 / 98</b>		
10 ELECTION	ELECTION DATE Month Day Year <b>3 / 10 / 98</b>		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special
11 OFFICE	OFFICE HELD (if any)	12 OFFICE SOUGHT (if known) <b>Travis County Commissioner, Pct. 3</b>	
13 DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS <input type="checkbox"/> additional pages	-- Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. -- Name Address / PO Box    Apt. / Suite #    City:    State:    Zip Code		

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

14 C/OH NAME

*Todd Baxter*

15 ACCOUNT # (Ethics Commission files)

16 SUPPORTING POLITICAL COMMITTEE(S)

\*\* This listing includes 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  <input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC  <input type="checkbox"/> additional pages	COMMITTEE NAME
	COMMITTEE ADDRESS
	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

17 NO REPORTABLE ACTIVITY

Check here if no reportable activity occurred during this reporting period. (Sign affidavit below and submit pages 1 and 2 only.)

18 CONTRIBUTION TOTALS

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

\$

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

\$ 8,000

EXPENDITURE TOTALS

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

\$

4. TOTAL POLITICAL EXPENDITURES

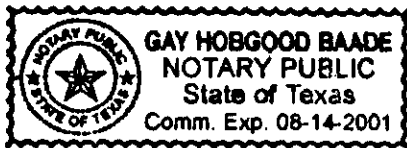
\$ 6,569.46

OUTSTANDING LOAN TOTALS

5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$

19 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.

*Todd Baxter*

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Todd Baxter, this the 9<sup>th</sup> day of February

19 98, to certify which, witness my hand and seal of office.

*Gay Hobgood Baade*  
Signature of officer administering oath

*Gay Hobgood Baade*  
Print name of officer administering oath

*Notary Public*  
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: 3	
2 FILER NAME Todd Baxter		3 ACCOUNT # (Ethics Commission filers)	
4 Date 1/6/98	5 Full name of contributor Bill Carr <input type="checkbox"/> out of state PAC	7 Amount of contribution (\$) \$5,000	8 In-kind contribution description (if applicable)
6 Contributor address: City; State; Zip Code P.O. Box 2947 Laredo, TX 78044			
9 Principal occupation		10 Employer (optional)	
Date 1/12/98	Full name of contributor Jack Fickessen <input type="checkbox"/> out of state PAC	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address: City; State; Zip Code 203 Copperleaf Austin, TX 78734			
Principal occupation		Employer (optional)	
Date 1/12/98	Full name of contributor Clay Pope <input type="checkbox"/> out of state PAC	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Contributor address: City; State; Zip Code 1122 Colorado St. Austin, TX 78701			
Principal occupation		Employer (optional)	
Date 1/16/98	Full name of contributor Bob McFarland <input type="checkbox"/> out of state PAC	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Contributor address: City; State; Zip Code 814 San Jacinto, Ste. 300 Austin, TX 78701			
Principal occupation		Employer (optional)	
Date 1/16/98	Full name of contributor Ray and Noelle Vaughn <input type="checkbox"/> out of state PAC	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Contributor address: City; State; Zip Code 204 Etha Place Austin, TX 78753			
Principal occupation		Employer (optional)	

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule A: <b>3</b>	
2 FILER NAME <b>Todd Baxter</b>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <b>1/16/98</b>	5 Full name of contributor <input type="checkbox"/> out of state PAC <b>Eric Anderson and Bettie Carrington</b>	7 Amount of contribution (\$) <b>50.00</b>	8 In-kind contribution description(if applicable)
6 Contributor address; City; State; Zip Code <b>10413 S. IH 35 Austin, TX 78747</b>			
9 Principal occupation		10 Employer (optional)	
Date <b>1/19/98</b>	Full name of contributor <input type="checkbox"/> out of state PAC <b>Carney and Judy Baxter</b>	Amount of contribution (\$) <b>500.00</b>	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code <b>1008 N. Pratt Street Pocahontas, AK 72455</b>			
Principal occupation		Employer (optional)	
Date <b>1/19/98</b>	Full name of contributor <input type="checkbox"/> out of state PAC <b>Dan Shelley</b>	Amount of contribution (\$) <b>250.00</b>	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code <b>1122 Colorado St. Austin, TX 78701</b>			
Principal occupation		Employer (optional)	
Date <b>1/19/98</b>	Full name of contributor <input type="checkbox"/> out of state PAC <b>Jeff Meyerson</b>	Amount of contribution (\$) <b>300.00</b>	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code <b>5512 Oakwood Cv. Austin, TX 78731</b>			
Principal occupation		Employer (optional)	
Date <b>1/29/98</b>	Full name of contributor <input type="checkbox"/> out of state PAC <b>Chuck Rice</b>	Amount of contribution (\$) <b>250.00</b>	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code <b>12609 Dessau Rd. Austin, TX 78754</b>			
Principal occupation		Employer (optional)	

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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: <span style="float: right; font-size: 1.5em;">3</span>	
2 FILER NAME <span style="font-size: 1.2em; font-family: cursive;">Todd Baxter</span>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <span style="font-size: 1.2em; font-family: cursive;">1/21/98</span>	5 Full name of contributor <input type="checkbox"/> out of state PAC <span style="font-size: 1.2em; font-family: cursive;">Gary Brown</span>	7 Amount of contribution (\$) <span style="font-size: 1.2em; font-family: cursive;">250.00</span>	8 In-kind contribution description(if applicable)
6 Contributor address: City; State; Zip Code <span style="font-size: 1.2em; font-family: cursive;">8805 Fairway Hills Dr. Austin TX 78750</span>			
9 Principal occupation		10 Employer (optional)	
Date <span style="font-size: 1.2em; font-family: cursive;">1/26/98</span>	Full name of contributor <input type="checkbox"/> out of state PAC <span style="font-size: 1.2em; font-family: cursive;">David and Darlene Marvitz</span>	Amount of contribution (\$) <span style="font-size: 1.2em; font-family: cursive;">100.00</span>	In-kind contribution description(if applicable)
Contributor address: City; State; Zip Code <span style="font-size: 1.2em; font-family: cursive;">1703 Palma Plaza. Austin TX 78703</span>			
Principal occupation		Employer (optional)	
Date	Full name of contributor <input type="checkbox"/> out of state PAC	Amount of contribution (\$)	In-kind contribution description(if applicable)
Contributor address: City; State; Zip Code			
Principal occupation		Employer (optional)	
Date	Full name of contributor <input type="checkbox"/> out of state PAC	Amount of contribution (\$)	In-kind contribution description(if applicable)
Contributor address: City; State; Zip Code			
Principal occupation		Employer (optional)	
Date	Full name of contributor <input type="checkbox"/> out of state PAC	Amount of contribution (\$)	In-kind contribution description(if applicable)
Contributor address: City; State; Zip Code			
Principal occupation		Employer (optional)	

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**PLEGGED CONTRIBUTIONS**

**SCHEDULE B**

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule B: <b>5</b>	
2 FILER NAME <b>Todd Baxter</b>		3 ACCOUNT # (Ethics Commission filers)	
4 TOTAL OF UNITEMIZED PLEDGES:      ⇨   ⇨   ⇨   ⇨   ⇨   ⇨   \$			
5 Date <b>1/2/98</b>	6 Full name of pledgor <b>Charlie Schnabel</b> <input type="checkbox"/> out of state PAC	8 Amount of pledge (\$) <b>250.00</b>	9 In-kind description (if applicable)
7 Pledgor address; City; State; Zip Code <b>1301s.IH 35 Austin TX 78704</b>			
10 Principal occupation		11 Employer (optional)	
Date <b>1/2/98</b>	Full name of pledgor <b>Fredrick Warner</b> <input type="checkbox"/> out of state PAC	Amount of pledge (\$) <b>100.00</b>	In-kind description (if applicable)
Pledgor address; City; State; Zip Code <b>815-A Brazos, Austin, TX 78701</b>			
Principal occupation		Employer (optional)	
Date <b>1/3/98</b>	Full name of pledgor <b>Chris Sheilds</b> <input type="checkbox"/> out of state PAC	Amount of pledge (\$) <b>250.00</b>	In-kind description (if applicable)
Pledgor address; City; State; Zip Code <b>1802 Yaupon Valley Rd Austin, TX 78740</b>			
Principal occupation		Employer (optional)	
Date <b>1/6/98</b>	Full name of pledgor <b>Robert Saunders</b> <input type="checkbox"/> out of state PAC	Amount of pledge (\$) <b>250.00</b>	In-kind description (if applicable)
Pledgor address; City; State; Zip Code <b>4020 S. Reynolds LaGrange TX 78945</b>			
Principal occupation		Employer (optional)	
Date <b>1/8/98</b>	Full name of pledgor <b>Mike Toomey</b> <input type="checkbox"/> out of state PAC	Amount of pledge (\$) <b>250.00</b>	In-kind description (if applicable)
Pledgor address; City; State; Zip Code <b>1122 Colorado, Ste 220, Austin 78701</b>			
Principal occupation		Employer (optional)	

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# PLEGGED CONTRIBUTIONS

# SCHEDULE B

The INSTRUCTION GUIDE explains how to complete this form.				1 Total pages Schedule B: <span style="float:right">5</span>	
2 FILER NAME <span style="font-size: 1.2em;">Todd Baxter</span>				3 ACCOUNT # (Ethics Commission filers)	
4 TOTAL OF UNITEMIZED PLEDGES:      ⇨   ⇨   ⇨   ⇨   ⇨   ⇨   \$					
5 Date <span style="font-size: 1.2em;">1/14/98</span>	6 Full name of pledgor <span style="font-size: 1.2em;">Bill Haley</span>	<input type="checkbox"/> out of state PAC		8 Amount of pledge (\$) <span style="font-size: 1.2em;">250.00</span>	9 In-kind description (if applicable)
7 Pledgor address:      City: State: Zip Code <span style="font-size: 1.2em;">700 E. 11th Austin, TX 78701</span>					
10 Principal occupation			11 Employer (optional)		
Date <span style="font-size: 1.2em;">1/14/98</span>	Full name of pledgor <span style="font-size: 1.2em;">Pike Powers</span>	<input type="checkbox"/> out of state PAC		Amount of pledge (\$) <span style="font-size: 1.2em;">500.00</span>	In-kind description (if applicable)
Pledgor address:      City: State: Zip Code <span style="font-size: 1.2em;">6000 Congress, Ste 2400 Austin 78701</span>					
Principal occupation			Employer (optional)		
Date <span style="font-size: 1.2em;">1/14/98</span>	Full name of pledgor <span style="font-size: 1.2em;">Grey Hooser</span>	<input type="checkbox"/> out of state PAC		Amount of pledge (\$) <span style="font-size: 1.2em;">100.00</span>	In-kind description (if applicable)
Pledgor address:      City: State: Zip Code <span style="font-size: 1.2em;">PO Box 1409 Austin TX 78707</span>					
Principal occupation			Employer (optional)		
Date <span style="font-size: 1.2em;">1/16/98</span>	Full name of pledgor <span style="font-size: 1.2em;">Michael Gallagher</span>	<input type="checkbox"/> out of state PAC		Amount of pledge (\$) <span style="font-size: 1.2em;">500.00</span>	In-kind description (if applicable)
Pledgor address:      City: State: Zip Code <span style="font-size: 1.2em;">40th Floor, 700 Louisiana TX 77002</span>					
Principal occupation			Employer (optional)		
Date <span style="font-size: 1.2em;">1/14/98</span>	Full name of pledgor <span style="font-size: 1.2em;">Dick Ingram</span>	<input type="checkbox"/> out of state PAC		Amount of pledge (\$) <span style="font-size: 1.2em;">250.00</span>	In-kind description (if applicable)
Pledgor address:      City: State: Zip Code <span style="font-size: 1.2em;">1315 Nueces Austin TX 78701</span>					
Principal occupation			Employer (optional)		

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**PLEGGED CONTRIBUTIONS**

**SCHEDULE B**

The INSTRUCTION GUIDE explains how to complete this form. 1 Total pages Schedule B: **5**

2 FILER NAME **Todd Baxter** 3 ACCOUNT # (Ethics Commission filers)

4 TOTAL OF UNITEMIZED PLEDGES:      ⇨   ⇨   ⇨   ⇨   ⇨   ⇨      \$

5 Date <b>1/21/98</b>	6 Full name of pledgor <input type="checkbox"/> out of state PAC <b>Mike McKinney</b>	8 Amount of pledge (\$) <b>250.00</b>	9 In-kind description (if applicable)
7 Pledgor address; City; State; Zip Code <b>221 E. 9th, Ste 400 San Jacinto Austin, TX, 78701 Bldg</b>			

10 Principal occupation      11 Employer (optional)

Date <b>1/23/98</b>	Full name of pledgor <input type="checkbox"/> out of state PAC <b>Jack Roberts</b>	Amount of pledge (\$) <b>250.00</b>	In-kind description (if applicable)
Pledgor address; City; State; Zip Code <b>100 Congress, Ste 1100, Austin, TX 78701</b>			

Principal occupation      Employer (optional)

Date <b>1/23/98</b>	Full name of pledgor <input type="checkbox"/> out of state PAC <b>Tom and Nancy Loeffler</b>	Amount of pledge (\$) <b>250.00</b>	In-kind description (if applicable)
Pledgor address; City; State; Zip Code <b>203 Ridgemont, San Antonio, TX 78209</b>			

Principal occupation      Employer (optional)

Date <b>1/27/98</b>	Full name of pledgor <input type="checkbox"/> out of state PAC <b>Brad Shields</b>	Amount of pledge (\$) <b>250.00</b>	In-kind description (if applicable)
Pledgor address; City; State; Zip Code <b>P.O. Box 162925 Austin TX 78716</b>			

Principal occupation      Employer (optional)

Date <b>1/28/98</b>	Full name of pledgor <input type="checkbox"/> out of state PAC <b>Jeff Kloster</b>	Amount of pledge (\$) <b>250.00</b>	In-kind description (if applicable)
Pledgor address; City; State; Zip Code <b>1400 Lavaca Austin, TX 78701 Suite 1400</b>			

Principal occupation      Employer (optional)

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# PLEGGED CONTRIBUTIONS

# SCHEDULE B

The INSTRUCTION GUIDE explains how to complete this form. 1 Total pages Schedule B: **5**

2 FILER NAME **Todd Baxter** 3 ACCOUNT # (Ethics Commission files)

4 TOTAL OF UNITEMIZED PLEDGES:      ⇨   ⇨   ⇨   ⇨   ⇨   ⇨   \$

5 Date <b>1/17/98</b>	6 Full name of pledgor <input type="checkbox"/> out of state PAC <b>Ron Herrman</b>	8 Amount of pledge (\$) <b>500.00</b>	9 In-kind description (if applicable)
7 Pledgor address: City; State; Zip Code <b>3206 Tehama Court Austin TX 78733</b>			

10 Principal occupation 11 Employer (optional)

Date <b>1/2/98</b>	Full name of pledgor <input type="checkbox"/> out of state PAC <b>Gerald Daugherty</b>	Amount of pledge (\$) <b>250.00</b>	In-kind description (if applicable)
Pledgor address: City; State; Zip Code <b>1115 Elm Austin, TX 78703</b>			

Principal occupation Employer (optional)

Date <b>1/6/98</b>	Full name of pledgor <input type="checkbox"/> out of state PAC <b>Matt Lyons</b>	Amount of pledge (\$) <b>250.00</b>	In-kind description (if applicable)
Pledgor address: City; State; Zip Code <b>301 Congress Suite 1200 Austin TX 78701</b>			

Principal occupation Employer (optional)

Date <b>1/14/98</b>	Full name of pledgor <input type="checkbox"/> out of state PAC <b>Jay Howard</b>	Amount of pledge (\$) <b>250.00</b>	In-kind description (if applicable)
Pledgor address: City; State; Zip Code <b>823 Congress Suite 1008 Austin TX 78701</b>			

Principal occupation Employer (optional)

Date <b>1/15/98</b>	Full name of pledgor <input type="checkbox"/> out of state PAC <b>Gibson D. "Gib" Lewis</b>	Amount of pledge (\$) <b>250.00</b>	In-kind description (if applicable)
Pledgor address: City; State; Zip Code <b>814 San Jacinto Austin, TX 78701 Suite 306</b>			

Principal occupation Employer (optional)

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# PLEGGED CONTRIBUTIONS

# SCHEDULE B

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule B: <b>5</b>	
2 FILER NAME <i>Todd Baxter</i>		3 ACCOUNT # (Ethics Commission filers)	
4 TOTAL OF UNITEMIZED PLEDGES:      ⇒      ⇒      ⇒      ⇒      ⇒      ⇒		\$	
5 Date <i>1/6/98</i>	6 Full name of pledgor <input type="checkbox"/> out of state PAC <i>Gilbert Turrieta</i>	8 Amount of pledge (\$) <i>250.00</i>	9 In-kind description (if applicable)
7 Pledgor address; City; State; Zip Code <i>814 San Jacinto Austin TX 78701 Suite 300</i>			
10 Principal occupation		11 Employer (optional)	
Date <i>1/2/98</i>	Full name of pledgor <input type="checkbox"/> out of state PAC <i>Charlie Evans</i>	Amount of pledge (\$) <i>500.00</i>	In-kind description (if applicable)
Pledgor address; City; State; Zip Code <i>814 San Jacinto Austin TX 78701 Suite 300</i>			
Principal occupation		Employer (optional)	
Date	Full name of pledgor <input type="checkbox"/> out of state PAC	Amount of pledge (\$)	In-kind description (if applicable)
Pledgor address; City; State; Zip Code			
Principal occupation		Employer (optional)	
Date	Full name of pledgor <input type="checkbox"/> out of state PAC	Amount of pledge (\$)	In-kind description (if applicable)
Pledgor address; City; State; Zip Code			
Principal occupation		Employer (optional)	
Date	Full name of pledgor <input type="checkbox"/> out of state PAC	Amount of pledge (\$)	In-kind description (if applicable)
Pledgor address; City; State; Zip Code			
Principal occupation		Employer (optional)	

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## POLITICAL EXPENDITURES

## SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F: 6
2 FILER NAME Todd Baxter		3 ACCOUNT # (Ethics Commission filers)
4 Date 1/15/98	5 Payee name Black + White Connection 6 Payee address; City; State; Zip Code 904-B West 12 <sup>th</sup> Austin, TX 78703	7 Amount (\$) 15.16
8 Purpose of expenditure Pictures		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held
Date 1/16/98	Payee name Artype Payee address; City; State; Zip Code 3530 Work Dr. Fort Meyers, Fla 33914	Amount (\$) 2,403.84
Purpose of expenditure Signs		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held
Date 1/16/98	Payee name Craftmark Payee address; City; State; Zip Code 602 Majic Mile Arlington, TX 76011	Amount (\$) 671.16
Purpose of expenditure Stickers + Door Hangers		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held
Date 1/17/98	Payee name Banner Signs Payee address; City; State; Zip Code 650 Canion Austin, TX 78752	Amount (\$) 563.98
Purpose of expenditure Signs		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held

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# POLITICAL EXPENDITURES

# SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.	1 Total pages Schedule F: <b>6</b>
2 FILER NAME <b>Todd Baxter</b>	3 ACCOUNT # (Ethics Commission filers)

4 Date <b>1/17/98</b>	5 Payee name <b>Builders Square</b>	7 Amount (\$) <b>128.83</b>
6 Payee address; City; State; Zip Code <b>4970 HWY 290 Austin, TX 78735</b>		

8 Purpose of expenditure <b>Sign Materials</b>	9 .. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought / held
---	--

Date <b>1/17/98</b>	Payee name <b>Ginnys</b>	Amount (\$) <b>730.19</b>
Payee address; City; State; Zip Code <b>5501 N. Lamar Austin, TX 78751</b>		

Purpose of expenditure <b>Stationary + Letterhead</b>	.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought / held
--	--

Date <b>1/17/98</b>	Payee name <b>Stripling Blake</b>	Amount (\$) <b>89.95</b>
Payee address; City; State; Zip Code <b>5508 Hwy 290 West, Austin TX 78735</b>		

Purpose of expenditure <b>Sign Materials</b>	.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought / held
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Date <b>1/17/98</b>	Payee name <b>Ace Hardware</b>	Amount (\$) <b>10.59</b>
Payee address; City; State; Zip Code <b>2300 Lohman's Crossing Austin, TX 78734</b>		

Purpose of expenditure <b>Sign Materials</b>	.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought / held
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## POLITICAL EXPENDITURES

## SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F: 6
2 FILER NAME Todd Baxter		3 ACCOUNT # (Ethics Commission filers)
4 Date 1/17/98	5 Payee name Home Depot 6 Payee address: City: State: Zip Code 5400 Brodie Lane, Austin, TX 78745	7 Amount (\$) 179.58
8 Purpose of expenditure Sign Materials		9 .. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought / held
Date 1/18/98	Payee name Lake Travis Republican Men's Club Payee address: City: State: Zip Code 107 RR 620 South, Austin, TX 78734	Amount (\$) 13.00
Purpose of expenditure Political Function		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought / held
Date 1/23/98	Payee name Ginnys Payee address: City: State: Zip Code 5501 N. Lamar Austin, TX 78751	Amount (\$) 722.83
Purpose of expenditure Campaign Literature		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought / held
Date 1/23/98	Payee name Go Honts Committee Payee address: City: State: Zip Code PO Box 340002 Austin, TX 78734	Amount (\$) 25.00
Purpose of expenditure Campaign Contribution		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought / held

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## POLITICAL EXPENDITURES

## SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F: 6
2 FILER NAME Todd Baxter		3 ACCOUNT # (Ethics Commission filers)
4 Date 1/6/98	5 Payee name Eckerd's 6 Payee address; City; State; Zip Code 3201 Bee Caves Road Austin, TX 78746	7 Amount (\$) 10.53
8 Purpose of expenditure Pictures		9 .. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought / held
Date 1/10/98	Payee name Ginnys Payee address; City; State; Zip Code 5501 N. Lamar Austin, TX 78751	Amount (\$) 16.24
Purpose of expenditure Copies		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought / held
Date 1/10/98	Payee name Office Depot Payee address; City; State; Zip Code 4501 W. Braker Austin, TX 78759	Amount (\$) 15.11
Purpose of expenditure File Folders/Supplies		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought / held
Date 1/12/98	Payee name Cablevision of Lake Travis Payee address; City; State; Zip Code 919 Ranch Road 020 Austin TX 78734	Amount (\$) 187.68
Purpose of expenditure Advertising		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought / held
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**POLITICAL EXPENDITURES**

**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F: <p style="text-align: center; font-size: 1.2em;">6</p>
2 FILER NAME <u>Todd Baxter</u>		3 ACCOUNT # (Ethics Commission filers)
4 Date <p style="font-size: 1.2em;">1/12/98</p>	5 Payee name <u>Nelda Wells Spears</u> 6 Payee address; City; State; Zip Code <u>1010 LAWACA AUSTIN, TX 78701</u>	7 Amount (\$) <p style="font-size: 1.2em;">38.00</p>
8 Purpose of expenditure <u>Precinct Map</u>		9 <small>.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name</small> Office sought / held
Date <p style="font-size: 1.2em;">1/12/98</p>	Payee name <u>Albertson's</u> Payee address; City; State; Zip Code <u>701 Capital of TEXAS AUSTIN, TX 78744</u>	Amount (\$) <p style="font-size: 1.2em;">19.20</p>
Purpose of expenditure <u>Postage</u>		<small>.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name</small> Office sought / held
Date <p style="font-size: 1.2em;">1/12/98</p>	Payee name <u>Eckerd</u> Payee address; City; State; Zip Code <u>3201 Bee Caves AUSTIN, TX 78744</u>	Amount (\$) <p style="font-size: 1.2em;">8.17</p>
Purpose of expenditure <u>Pictures</u>		<small>.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name</small> Office sought / held
Date <p style="font-size: 1.2em;">1/13/98</p>	Payee name <u>Banner Signs</u> Payee address; City; State; Zip Code <u>650 Canyon St. AUSTIN, TX 78752</u>	Amount (\$) <p style="font-size: 1.2em;">563.99</p>
Purpose of expenditure <u>Signs</u>		<small>.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name</small> Office sought / held

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**POLITICAL EXPENDITURES**

**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

6

2 FILER NAME

Todd Baxter

3 ACCOUNT # (Ethics Commission filers)

4 Date

1/23/98

5 Payee name

Office Max

7 Amount (\$)

52.75

6 Payee address; City; State; Zip Code

4501 W. Braker Austin, TX 78759

8 Purpose of expenditure

Copies

9 .. Complete if direct expenditure to benefit C/OH ..  
Candidate / Officeholder name

Office sought / held

Date

1/24/98

Payee name

Home Depot

Amount (\$)

98.27

Payee address; City; State; Zip Code

5400 Brodie Lane, Austin, TX 78745

Purpose of expenditure

Sign Material

.. Complete if direct expenditure to benefit C/OH ..  
Candidate / Officeholder name

Office sought / held

Date

1/26/98

Payee name

Black + White Connection

Amount (\$)

5.41

Payee address; City; State; Zip Code

904-B West 12th Austin, TX 78703

Purpose of expenditure

Picture

.. Complete if direct expenditure to benefit C/OH ..  
Candidate / Officeholder name

Office sought / held

Date

Payee name

Amount (\$)

Payee address; City; State; Zip Code

Purpose of expenditure

.. Complete if direct expenditure to benefit C/OH ..  
Candidate / Officeholder name

Office sought / held

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