

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME
Stacy Dukes - Rhone Campaign

15 ACCOUNT # (Ethics Commission filers)

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	COMMITTEE NAME
<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS
<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

additional pages

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	\$	0
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2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	0
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EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$	0
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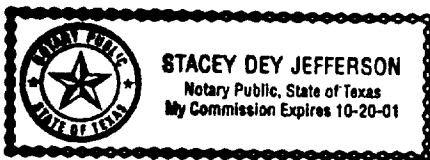
4. TOTAL POLITICAL EXPENDITURES	\$	0
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OUTSTANDING
LOAN TOTALS

5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0
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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.



Stacy
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Stacy Dukes-Rhone, this the 3rd day of March, 19 98, to certify which, witness my hand and seal of office.

Stacey Dey Jefferson
Signature of officer administering oath

Stacey Dey Jefferson
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:	
2 FILER NAME Stacy Dukes-Rhone Campaign		3 ACCOUNT # (Ethics Commission filers)	
4 Date 2/31/98	5 Full name of contributor Luther C. Simond <input type="checkbox"/> out of state PAC	7 Amount of contribution (\$) 500.	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 2005 Hamilton 78702			
9 Principal occupation		10 Employer (optional)	
Date 2/4	Full name of contributor Martin Leff <input type="checkbox"/> out of state PAC	Amount of contribution (\$) 100.	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3905 Mt. Bonnell 78731			
Principal occupation		Employer (optional)	
Date 2/4	Full name of contributor Lorraine Phillips <input type="checkbox"/> out of state PAC	Amount of contribution (\$) 25.	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 6113 Reicher 78723			
Principal occupation		Employer (optional)	
Date 2/4	Full name of contributor Gene Fondren <input type="checkbox"/> out of state PAC	Amount of contribution (\$) 500.	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code PO Box 1028 78767			
Principal occupation		Employer (optional)	
Date 2/7	Full name of contributor Mrs. Veryl Reid <input type="checkbox"/> out of state PAC	Amount of contribution (\$) 10.	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1704 Harvey 78702			
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.

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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:	
2 FILER NAME <p style="text-align: center;">Stacy Dukes-Rhone Campaign</p>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <p style="text-align: center;">2/9</p>	5 Full name of contributor <input type="checkbox"/> out of state PAC <p style="text-align: center;">Fu Ming Chow</p>	7 Amount of contribution (\$) <p style="text-align: center;">250.</p>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <p style="text-align: center;">2201 Teckla Amarillo, TX 79106</p>			
9 Principal occupation		10 Employer (optional)	
Date <p style="text-align: center;">2/11</p>	Full name of contributor <input type="checkbox"/> out of state PAC <p style="text-align: center;">Robert Davis</p>	Amount of contribution (\$) <p style="text-align: center;">50.</p>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <p style="text-align: center;">3607 Pinnacle # 111 78746</p>			
Principal occupation		Employer (optional)	
Date <p style="text-align: center;">2/13</p>	Full name of contributor <input type="checkbox"/> out of state PAC <p style="text-align: center;">Kay Gregory</p>	Amount of contribution (\$) <p style="text-align: center;">100.</p>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <p style="text-align: center;">2909 W. Lake Cove 78746</p>			
Principal occupation		Employer (optional)	
Date <p style="text-align: center;">2/12</p>	Full name of contributor <input type="checkbox"/> out of state PAC <p style="text-align: center;">Overton Family</p>	Amount of contribution (\$) <p style="text-align: center;">200.</p>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <p style="text-align: center;">5101 Regency 78724</p>			
Principal occupation		Employer (optional)	
Date <p style="text-align: center;">2/15</p>	Full name of contributor <input type="checkbox"/> out of state PAC <p style="text-align: center;">Leroy Wormley</p>	Amount of contribution (\$) <p style="text-align: center;">100.</p>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <p style="text-align: center;">9007 Rockcrest 78759</p>			
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:

2 FILER NAME

Stacy Dukes-Rhone Campaign

3 ACCOUNT # (Ethics Commission filers)

4 Date

2/21

5 Full name of contributor out of state PAC

Elvis Shoaf

6 Contributor address; City; State; Zip Code

10206 Faylin
78753

7 Amount of contribution (\$)

50.

8 In-kind contribution description(if applicable)

9 Principal occupation

10 Employer (optional)

Date

2/21

Full name of contributor out of state PAC

Michael Von Ohlen

Contributor address; City; State; Zip Code

9509 Leaning Rock
78730

Amount of contribution (\$)

250.

In-kind contribution description(if applicable)

Principal occupation

Employer (optional)

Date

2/23

Full name of contributor out of state PAC

Melvin Wrenn

Contributor address; City; State; Zip Code

Box 142993
78714

Amount of contribution (\$)

25.

In-kind contribution description(if applicable)

Principal occupation

Employer (optional)

Date

2/23

Full name of contributor out of state PAC

Aziz Laurent

Contributor address; City; State; Zip Code

1625 Cabinwood
78746

Amount of contribution (\$)

50.

In-kind contribution description(if applicable)

Principal occupation

Employer (optional)

Date

2/23

Full name of contributor out of state PAC

Joi Hardin

Contributor address; City; State; Zip Code

10507 Cooper Hill
78758

Amount of contribution (\$)

50.

In-kind contribution description(if applicable)

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:	
2 FILER NAME Stacy Dukes-Rhone Campaign		3 ACCOUNT # (Ethics Commission filers)	
4 Date 2/23	5 Full name of contributor <input type="checkbox"/> out of state PAC La Quinta Wardsworth	7 Amount of contribution (\$) 25.	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 7038 Jay Houston, TX 77028			
9 Principal occupation		10 Employer (optional)	
Date 2/23	Full name of contributor <input type="checkbox"/> out of state PAC Ramon King	Amount of contribution (\$) 100.	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1800 Guadalupe #2C 78701			
Principal occupation		Employer (optional)	
Date 2/23	Full name of contributor <input type="checkbox"/> out of state PAC Warren Nicholas	Amount of contribution (\$) 50.	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 5705 Whitebrook 78724			
Principal occupation		Employer (optional)	
Date 2/23	Full name of contributor <input type="checkbox"/> out of state PAC Myneca Ojo	Amount of contribution (\$) 10.	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3101 Shalene Drive #122 78728			
Principal occupation		Employer (optional)	
Date 2/23	Full name of contributor <input type="checkbox"/> out of state PAC Thomas Henderson	Amount of contribution (\$) 150	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code PO Box 1415 78767			
Principal occupation		Employer (optional)	

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME <p style="text-align: center;">Stacy Dukes-Rhone Campaign</p>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <p style="text-align: center;">2/23</p>	5 Full name of contributor <input type="checkbox"/> out of state PAC <p style="text-align: center;">Charlesetta Wormley</p>	7 Amount of contribution (\$) <p style="text-align: center;">20.</p>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <p style="text-align: center;">9007 Rockcrest 78759</p>			
9 Principal occupation		10 Employer (optional)	
Date <p style="text-align: center;">2/23</p>	Full name of contributor <input type="checkbox"/> out of state PAC <p style="text-align: center;">Andriann Broaders</p>	Amount of contribution (\$) <p style="text-align: center;">10.</p>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <p style="text-align: center;">2600 Gracy Farms #925 78758</p>			
Principal occupation		Employer (optional)	
Date <p style="text-align: center;">2/23</p>	Full name of contributor <input type="checkbox"/> out of state PAC <p style="text-align: center;">Jocy Wright</p>	Amount of contribution (\$) <p style="text-align: center;">10.</p>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <p style="text-align: center;">308 Winecup Cedar Park, TX 78613</p>			
Principal occupation		Employer (optional)	
Date <p style="text-align: center;">2/23</p>	Full name of contributor <input type="checkbox"/> out of state PAC <p style="text-align: center;">Carlyn Adams</p>	Amount of contribution (\$) <p style="text-align: center;">20.</p>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <p style="text-align: center;">1209 Meadow Park Cedar Park, TX 78613</p>			
Principal occupation		Employer (optional)	
Date <p style="text-align: center;">2/23</p>	Full name of contributor <input type="checkbox"/> out of state PAC <p style="text-align: center;">Dora Thomas</p>	Amount of contribution (\$) <p style="text-align: center;">25.</p>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <p style="text-align: center;">3203 Cherrywood 78722</p>			
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:	
2 FILER NAME <p style="text-align: center;">Stacy Dukes-Rhone Campaign</p>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <p style="text-align: center;">2/23</p>	5 Full name of contributor <input type="checkbox"/> out of state PAC <p style="text-align: center;">Dorn Smith</p>	7 Amount of contribution (\$) <p style="text-align: center;">25.</p>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <p style="text-align: center;">8760-A Research #290 78758</p>			
9 Principal occupation		10 Employer (optional)	
Date <p style="text-align: center;">2/23</p>	Full name of contributor <input type="checkbox"/> out of state PAC <p style="text-align: center;">Emma Dorsey</p>	Amount of contribution (\$) <p style="text-align: center;">10.</p>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <p style="text-align: center;">3608 Amberside 78759</p>			
Principal occupation		Employer (optional)	
Date <p style="text-align: center;">2/24</p>	Full name of contributor <input type="checkbox"/> out of state PAC <p style="text-align: center;">SK. Sheffield</p>	Amount of contribution (\$) <p style="text-align: center;">25.</p>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <p style="text-align: center;">1304 Karen 78759</p>			
Principal occupation		Employer (optional)	
Date <p style="text-align: center;">2/25</p>	Full name of contributor <input type="checkbox"/> out of state PAC <p style="text-align: center;">Nancy Fisher</p>	Amount of contribution (\$) <p style="text-align: center;">100.</p>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <p style="text-align: center;">1122 Colorado #301 78701</p>			
Principal occupation		Employer (optional)	
Date <p style="text-align: center;">2/16</p>	Full name of contributor <input type="checkbox"/> out of state PAC <p style="text-align: center;">Benny Hawkins</p>	Amount of contribution (\$) <p style="text-align: center;">200.</p>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <p style="text-align: center;">6602 Greensboro 78723</p>			
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:	
2 FILER NAME Stacy Dukes-Rhone Campaign		3 ACCOUNT # (Ethics Commission filers)	
4 Date 2/15	5 Full name of contributor <input type="checkbox"/> out of state PAC Kay Sullivan	7 Amount of contribution (\$) 25.	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 6503 Arnold 78723			
9 Principal occupation		10 Employer (optional)	
Date 2/6	Full name of contributor <input type="checkbox"/> out of state PAC Jorge D. Guerra	Amount of contribution (\$) 50	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 900 Linden St 78702			
Principal occupation		Employer (optional)	
Date 2/19	Full name of contributor <input type="checkbox"/> out of state PAC Anderson Howard	Amount of contribution (\$) 100.	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1001 Nimbus #39 Pflugerville, TX 78660			
Principal occupation		Employer (optional)	
Date 2/19	Full name of contributor <input type="checkbox"/> out of state PAC Nancy Fisher	Amount of contribution (\$) 500.	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1122 Colorado #301 Austin TX 78701			
Principal occupation		Employer (optional)	
Date 2/28	Full name of contributor <input type="checkbox"/> out of state PAC Dawnne Dukes	Amount of contribution (\$)	In-kind contribution description (if applicable) 700. Office Space
Contributor address; City; State; Zip Code PO Box 14645 Austin TX 78761			
Principal occupation		Employer (optional)	

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A:	
2 FILER NAME <p style="text-align: center;">Stacy Dukes-Rhone Campaign</p>				3 ACCOUNT # (Ethics Commission filers)	
4 Date <p style="text-align: center;">3/2</p>	5 Full name of contributor <input type="checkbox"/> out of state PAC <p style="text-align: center;">Ben Dukes</p>	7 Amount of contribution (\$) <p style="text-align: center;">500</p>	8 In-kind contribution description (if applicable)		
6 Contributor address; City; State; Zip Code <p style="text-align: center;">9005 Happy Trl. Austin TX 78754</p>					
9 Principal occupation			10 Employer (optional)		
Date <p style="text-align: center;">2/22</p>	Full name of contributor <input type="checkbox"/> out of state PAC <p style="text-align: center;">Finnis E. Carter Jr. + Lena Parker</p>	Amount of contribution (\$) <p style="text-align: center;">25.</p>	In-kind contribution description (if applicable)		
Contributor address; City; State; Zip Code <p style="text-align: center;">3409 Lakeside Dr. 78723</p>					
Principal occupation			Employer (optional)		
Date <p style="text-align: center;">2/24</p>	Full name of contributor <input type="checkbox"/> out of state PAC <p style="text-align: center;">Reginald + Trellanie Bostic</p>	Amount of contribution (\$) <p style="text-align: center;">50</p>	In-kind contribution description (if applicable)		
Contributor address; City; State; Zip Code <p style="text-align: center;">14021 Maricella Ln 78660</p>					
Principal occupation			Employer (optional)		
Date <p style="text-align: center;">2/28</p>	Full name of contributor <input type="checkbox"/> out of state PAC <p style="text-align: center;">Phase II Salon</p>	Amount of contribution (\$) <p style="text-align: center;">25</p>	In-kind contribution description (if applicable)		
Contributor address; City; State; Zip Code <p style="text-align: center;">6448 Hwy 290 E. Suite B-100 78723</p>					
Principal occupation			Employer (optional)		
Date <p style="text-align: center;">2/23</p>	Full name of contributor <input type="checkbox"/> out of state PAC <p style="text-align: center;">TEXAS Bell Employee PAC</p>	Amount of contribution (\$) <p style="text-align: center;">200</p>	In-kind contribution description (if applicable)		
Contributor address; City; State; Zip Code <p style="text-align: center;">1616 Guadalupe, Ste 501 78701</p>					
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**

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SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this Schedule A:	
2 FILER NAME Stacy Dukes-Rhone Campaign		3 ACCOUNT # (Ethics Commission files)	
4 Date 2/24	5 Full name of contributor <input type="checkbox"/> out of state PAC Nancy Mollada	7 Amount of contribution (\$) 200	8 In-kind contribution description (if applicable)
6 Contributor address: City; State; Zip Code 5613 Burrough Cove. 78745			
9 Principal occupation		10 Employer (optional)	
Date 2/25	Full name of contributor <input type="checkbox"/> out of state PAC Carl Mullen	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City; State; Zip Code P.O. Box 12502 78711			
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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LOANS

SCHEDULE E

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule E:	
2 FILER NAME Stacy Dukes-Rhone Campaign		3 ACCOUNT # (Ethics Commission filers)	
4 TOTAL OF UNITEMIZED LOANS: ⇒ ⇒ ⇒ ⇒ ⇒ ⇒ \$			
5 Date of loan 2/25/98	7 Name of lender <input type="checkbox"/> out of state PAC Dawnna Dukes	9 Loan Amount (\$) 7326.69	
6 Is lender a financial Institution? Y <input checked="" type="radio"/> N	8 Lender address; City; State; Zip Code P.O. Box 14645 Austin TX 78761	10 Interest rate 0	
		11 Maturity date N/A	
12 Description of Collateral <input checked="" type="checkbox"/> none			
13 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	14 Name of guarantor 15 Guarantor address; City; State; Zip Code		16 Amount Guaranteed (\$)
17 Principal Occupation		18 Employer	
Date of loan	Name of lender <input type="checkbox"/> out of state PAC	Loan Amount (\$)	
Is lender a financial Institution? Y N	Lender address; City; State; Zip Code	Interest rate	
		Maturity date	
Description of Collateral <input type="checkbox"/> none			
GUARANTOR INFORMATION <input type="checkbox"/> not applicable	Name of guarantor Guarantor address; City; State; Zip Code		Amount Guaranteed (\$)
Principal Occupation		Employer	

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