

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

4109

FORM C/OH COVER SHEET PG 1

| | | | |
|--|---|---|--------------------------------|
| The C/OH INSTRUCTION GUIDE explains how to complete this form. | | 1 ACCOUNT # (Ethics Commission filers) | 2 Total pages filed: 16 |
| 3 CANDIDATE / OFFICEHOLDER NAME | TITLE FIRST MI NICKNAME LAST SUFFIX | OFFICE USE ONLY | |
| | TODD A. BAXTER | Date Received JUL 15 4 42 PM '98 FILED | |
| 4 CANDIDATE / OFFICEHOLDER ADDRESS <input type="checkbox"/> Change of Address | ADDRESS / PO BOX, APT / SUITE #, CITY, STATE, ZIP CODE | Receipt # HD / PM Amount Date Processed Date Imaged | |
| | P.O. BOX 101122 AUSTIN, TX 78710 | | |
| 5 CAMPAIGN TREASURER NAME | TITLE FIRST MI NICKNAME LAST SUFFIX | Receipt # HD / PM Amount Date Processed Date Imaged | |
| | FRANK V. GALITSKI | | |
| 6 CAMPAIGN TREASURER ADDRESS (Residence or business) | STREET ADDRESS (NO PO BOX PLEASE), APT / SUITE #, CITY, STATE, ZIP CODE | | |
| | 1122 COLORADO, STE. 1000 AUSTIN, TX 78701 | | |
| 7 CAMPAIGN TREASURER PHONE | AREA CODE PHONE NUMBER EXTENSION | | |
| | (512) 477-5131 | | |
| 8 REPORT TYPE | <input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input checked="" 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 |
| | 4 / 5 / 98 | | 6 / 30 / 98 |
| 10 ELECTION | ELECTION DATE Month Day Year | ELECTION TYPE | |
| | 11 / 3 / 98 | <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special | |
| 11 OFFICE | OFFICE HELD (if any) | 12 OFFICE SOUGHT (if known) | |
| | | COUNTY COMMISSIONER, PCT. 3 | |
| 13 DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS | ** 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 | | |
| | additional pages | | |

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME

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 <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 | \$ 409.15 |
|---|-----------|

| | |
|--|-----------|
| 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ 11,130 |
|--|-----------|

EXPENDITURE TOTALS

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

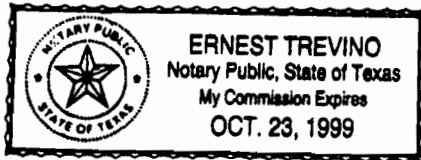
| | |
|---------------------------------|--------------|
| 4. TOTAL POLITICAL EXPENDITURES | \$ 13,450.00 |
|---------------------------------|--------------|

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 Bette

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Ernest Trevino, this the 15th day of July, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Print name of officer administering oath

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:

6

2 FILER NAME

Todd Baxter

3 ACCOUNT # (Ethics Commission files)

4 Date

4/17/98

5 Full name of contributor

Bruce & Robin Cash

out of state PAC

7 Amount of contribution (\$)

800.00

8 In-kind contribution description (if applicable)

6 Contributor address: City: State: Zip Code

4315 Shadow Oak Ln.
Austin, TX 78740

9 Principal occupation

10 Employer (optional)

Date

4/17/98

Full name of contributor

Hector & Arleigh DeLeon

out of state PAC

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

Contributor address: City: State: Zip Code

3 Leopold Ln.
Austin, TX 78740

Principal occupation

Employer (optional)

Date

4/17/98

Full name of contributor

Richard Baxter

out of state PAC

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Contributor address: City: State: Zip Code

1515 Caribbean Way
Laguna, CA 92651

Principal occupation

Employer (optional)

Date

4/17/98

Full name of contributor

Bobby Finley

out of state PAC

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Contributor address: City: State: Zip Code

7904 Truman Cove
Austin, TX 78727

Principal occupation

Employer (optional)

Date

4/19/98

Full name of contributor

Dr. & Mrs. Graham

out of state PAC

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

Contributor address: City: State: Zip Code

821 Central
Elgin, TX 78021

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: | |
| 2 FILER NAME | | | 3 ACCOUNT # (Ethics Commission filers) | |
| 4 Date | 5 Full name of contributor <input type="checkbox"/> out of state PAC | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) | |
| 4/21/98 | Charlie Schnabel 6 Contributor address: City: State: Zip Code P.O. Box 1572 Austin, TX | 250.00 | | |
| 9 Principal occupation | | 10 Employer (optional) | | |
| Date | Full name of contributor <input type="checkbox"/> out of state PAC | Amount of contribution (\$) | In-kind contribution description (if applicable) | |
| 4/21/98 | Gilbert Turrietta Contributor address: City: State: Zip Code 814 San Jacinto, Ste. 300 Austin, TX 78701 | 200.00 | | |
| 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) | |
| 4/27/98 | Craig Carlton Contributor address: City: State: Zip Code 112 Brazos, Ste 210 Austin, TX 78701 | 850.00 | | |
| 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) | |
| 4/20/98 | Tom & Nancy Loeffler Contributor address: City: State: Zip Code 203 Ridgemont San Antonio, TX 78209 | 250.00 | | |
| 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) | |
| 4/27/98 | Lake Travis Republican PAC Contributor address: City: State: Zip Code P.O. Box 340033 Austin, TX 78734 | 500.00 | voter database information | |
| Principal occupation | | Employer (optional) | | |

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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|---|---|---------------------------------------|--|
| The INSTRUCTION GUIDE explains how to complete this form. | | 1 Total pages Schedule A: | |
| 2 FILER NAME | | 3 ACCOUNT # (Ethics Commission files) | |
| 4 Date | 5 Full name of contributor <input type="checkbox"/> out of state PAC | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) |
| 5/1/98 | Lake Travis Republican PAC 6 Contributor address: City: State: Zip Code PO BOX 340033 AUSTIN, TX 78734 | 500.00 | |
| 9 Principal occupation | | 10 Employer (optional) | |
| Date | Full name of contributor <input type="checkbox"/> out of state PAC | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 4/29/98 | Circle C PAC Contributor address: City: State: Zip Code PO BOX 91350 AUSTIN, TX 78709 | 500.00 | |
| 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) |
| 5/20/98 | Jim Warren Contributor address: City: State: Zip Code 1108 Lavaca, SK 400 AUSTIN, TX 78701 | 250.00 | |
| 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) |
| 5/2/98 | Bill Bush Contributor address: City: State: Zip Code 24 Greenway Plaza, SK 1700 HOUSTON, TX 77044 | 100.00 | |
| 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) |
| 5/21/98 | Mignon McGarry Contributor address: City: State: Zip Code P.O. BOX 1501 AUSTIN, TX 78707 | 500.00 | |
| 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 | | | 3 ACCOUNT # (Ethics Commission files) | |
| 4 Date | 5 Full name of contributor <input type="checkbox"/> out of state PAC | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) | |
| 5/27/98 | Charlie Wallace Contributor address: City: State: Zip Code 6205 Summerwood Austin, TX 78759 | 100.00 | | |
| 9 Principal occupation | | 10 Employer (optional) | | |
| Date | Full name of contributor <input type="checkbox"/> out of state PAC | Amount of contribution (\$) | In-kind contribution description (if applicable) | |
| 4/30/98 | Jeff Maddux Contributor address: City: State: Zip Code 12707 Hwy 71W Austin, TX 78736-1225 | | \$250 Billboard | |
| 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) | |
| 6/1/98 | Johnny Voudouris Contributor address: City: State: Zip Code 3755 Capitol of Texas S, SK 355 Austin, TX 78704 | 1,000.00 | | |
| 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) | |
| 6/1/98 | Sharon Voudouris Contributor address: City: State: Zip Code 3755 Capital of TX S, SK 355 Austin, TX 78704 | 1,000.00 | | |
| 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) | |
| 5/27/98 | Shields Legislative Associates Contributor address: City: State: Zip Code P.O. Box 102925 Austin, TX 78714 | 250.00 | | |
| 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 | | 3 ACCOUNT # (Ethics Commission file) | |
| 4 Date | 5 Full name of contributor <input type="checkbox"/> out of state PAC | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) |
| 6/19/98 | Jim Bartlett 6 Contributor address: City: State: Zip Code 24 Greenway Plaza, Ste 1700 Houston, TX 77046 | 250.00 | |
| 9 Principal occupation | | 10 Employer (optional) | |
| Date | Full name of contributor <input type="checkbox"/> out of state PAC | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 6/22/98 | Scott & Tracey Lisse Contributor address: City: State: Zip Code 1022 High Gate Ct. Sugarland, TX 77479 | 100.00 | |
| 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) |
| 6/22/98 | Rod & Cindy Baxter Contributor address: City: State: Zip Code 7503 Fernbrook Houston, TX 77070 | 500.00 | |
| 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) |
| 6/25/98 | Akin, Grump, Strauss, Haver & Feld Contributor address: City: State: Zip Code Civic Action Committee 916 Congress Ave., Ste 1900 Austin TX 78701 | 500.00 | |
| 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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POLITICAL EXPENDITURES

SCHEDULE F

| | | |
|---|--|--|
| The INSTRUCTION GUIDE explains how to complete this form. | | 1 Total pages Schedule F: 8 |
| 2 FILER NAME Todd Baxter | | 3 ACCOUNT # (Ethics Commission filers) |
| 4 Date 4/7/98 | 5 Payee name KVET Radio | 7 Amount (\$) \$122.40 |
| 6 Payee address: City: State: Zip Code 705 N. Lamar Austin, TX 78703 | | |
| 8 Purpose of expenditure Advertisement | | 9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought / held |
| Date 4/7/98 | Payee name Westlake Picayune | Amount (\$) \$340.29 |
| Payee address: City: State: Zip Code 3103 Bee Caves Road Austin, TX 78740 | | |
| Purpose of expenditure Advertisement | | -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought / held |
| Date 4/7/98 | Payee name Oak Hill Gazette | Amount (\$) \$116.00 |
| Payee address: City: State: Zip Code 7200 Hwy 71 Austin, TX 78735 | | |
| Purpose of expenditure Advertisement | | -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought / held |
| Date 4/7/98 | Payee name KLBJ Radio | Amount (\$) \$119.00 |
| Payee address: City: State: Zip Code 8309 N. IH 35 Austin, TX 78753 | | |
| Purpose of expenditure Advertisement | | -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought / held |

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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 | | 3 ACCOUNT # (Ethics Commission files) | |
| 4 Date | 5 Full name of contributor <input type="checkbox"/> out of state PAC | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) |
| 4/9/98 | Jim & Brenda Pudd 6 Contributor address: City: State: Zip Code P.O. Box 004507 Austin, TX 78708 | 100.00 | |
| 9 Principal occupation | | 10 Employer (optional) | |
| Date | Full name of contributor <input type="checkbox"/> out of state PAC | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 4/10/98 | Gib Lewis Contributor address: City: State: Zip Code P.O. Box 3150 Austin, TX 78704 | 250.00 | |
| 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) |
| 4/10/98 | Marion Sanford Contributor address: City: State: Zip Code 1100 Galleria Financial Center 5075 Westheimer Houston, TX 77056 | 250.00 | |
| 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) |
| 4/13/98 | Jimmy Evans Contributor address: City: State: Zip Code P.O. Box 91069 Austin, TX 78709 | 750.00 | |
| 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) |
| 4/16/98 | Jack Fickesson Contributor address: City: State: Zip Code 203 Copperleaf Austin, TX 78734 | 100.00 | |
| Principal occupation | | Employer (optional) | |

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

POLITICAL EXPENDITURES

SCHEDULE F

| | | |
|---|-----------------------------------|--|
| The INSTRUCTION GUIDE explains how to complete this form. | | 1 Total pages Schedule F: |
| 2 FILER NAME <i>Todd Baxter</i> | | 3 ACCOUNT # (Ethics Commission filers) |
| 4 Date <i>4/9/98</i> | 5 Payee name <i>Postmaster</i> | 7 Amount (\$) <i>\$1,196.95</i> |
| 6 Payee address: City: State: Zip Code <i>3217 Bee Cave Austin, TX 78716</i> | | |
| 8 Purpose of expenditure <i>Postage</i> | | 9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought / held |
| Date <i>4/10/98</i> | Payee name <i>KEYE TV</i> | Amount (\$) <i>\$365.50</i> |
| Payee address: City: State: Zip Code <i>10700 Metric Austin, TX 78758</i> | | |
| Purpose of expenditure <i>Advertisement</i> | | -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought / held |
| Date <i>4/10/98</i> | Payee name <i>KXAN TV</i> | Amount (\$) <i>\$361.25</i> |
| Payee address: City: State: Zip Code <i>908 W. MLK Austin, TX 78701</i> | | |
| Purpose of expenditure <i>Advertisement</i> | | -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought / held |
| Date <i>4/13/98</i> | Payee name <i>McCoys</i> | Amount (\$) <i>\$9.33</i> |
| Payee address: City: State: Zip Code <i>11011 Hwy 290 Austin, TX</i> | | |
| Purpose of expenditure <i>Sign Materials</i> | | -- 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: |
| 2 FILER NAME <i>Todd Baxter</i> | | 3 ACCOUNT # (Ethics Commission filers) |
| 4 Date <i>4/13/98</i> | 5 Payee name <i>Palmer Auditorium</i> | 7 Amount (\$) <i>\$ 9.20</i> |
| 6 Payee address: City: State: Zip Code <i>400 S. 1st AUSTIN, TX</i> | | |
| 8 Purpose of expenditure <i>Table Rental</i> | | 9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held |
| Date <i>4/17/98</i> | Payee name <i>GTE</i> | Amount (\$) <i>\$ 194.80</i> |
| Payee address: City: State: Zip Code <i>P.O. BOX 33049 ST. PETERSBURG, FLA 33733</i> | | |
| Purpose of expenditure <i>Phone Expense</i> | | ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held |
| Date <i>4/20/98</i> | Payee name <i>Lake Travis Republican Mens Club</i> | Amount (\$) <i>\$ 13.00</i> |
| Payee address: City: State: Zip Code <i>107 RR 020 SOUTH AUSTIN TX 78734</i> | | |
| Purpose of expenditure <i>Luncheon</i> | | ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held |
| Date <i>4/21/98</i> | Payee name <i>Tim Stanton Audio</i> | Amount (\$) <i>\$ 333.77</i> |
| Payee address: City: State: Zip Code <i>1501 W. 5th AUSTIN TX 78701</i> | | |
| Purpose of expenditure <i>Studio Time - Advertisement</i> | | ** 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: |
| 2 FILER NAME <i>Todd Baxter</i> | | 3 ACCOUNT # (Ethics Commission filers) |
| 4 Date <i>4/24/98</i> | 5 Payee name <i>Albertsons</i> | 7 Amount (\$) <i>\$113.42</i> |
| 6 Payee address: City: State: Zip Code <i>701 Capitol of TX Hwy S Austin, TX 78744</i> | | |
| 8 Purpose of expenditure <i>Food + refreshments for campaign volunteers</i> | | 9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held |
| Date <i>5/1/98</i> | Payee name <i>Travis County Clerk</i> | Amount (\$) <i>\$40.00</i> |
| Payee address: City: State: Zip Code <i>314 W. 11th Austin, TX 78701</i> | | |
| Purpose of expenditure <i>Election returns</i> | | ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held |
| Date <i>5/6/98</i> | Payee name <i>ASL Advertising Specialties</i> | Amount (\$) <i>\$209.73</i> |
| Payee address: City: State: Zip Code <i>2512 Rio Grande Austin, TX 78705</i> | | |
| Purpose of expenditure <i>Campaign Shirts</i> | | ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held |
| Date <i>5/6/98</i> | Payee name <i>i2i Group</i> | Amount (\$) <i>\$270.63</i> |
| Payee address: City: State: Zip Code <i>4408 Burnet Austin, TX 78754</i> | | |
| Purpose of expenditure <i>Computer Graphics</i> | | ** 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: |
| 2 FILER NAME | | 3 ACCOUNT # (Ethics Commission filers) |
| 4 Date | 5 Payee name | 7 Amount (\$) |
| 5/7/98 | The Austin Review | \$50.00 |
| 6 Payee address: City: State: Zip Code | | |
| 2002-A Guadalupe, #204 Austin, TX 78705 | | |
| 8 Purpose of expenditure | | 9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought / held |
| Advertisement | | |
| Date | Payee name | Amount (\$) |
| 5/13/98 | Northwest Austin Republican Womens Club | \$30.00 |
| Payee address: City: State: Zip Code | | |
| 9006 Scotsman Austin, TX 78750 | | |
| Purpose of expenditure | | -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought / held |
| Candidate Dinner | | |
| Date | Payee name | Amount (\$) |
| 5/20/98 | Paragon Printing | \$3,539.60 |
| Payee address: City: State: Zip Code | | |
| 223 W. Anderson Ln. Austin, TX 78759 | | |
| Purpose of expenditure | | -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought / held |
| Mailer Printing | | |
| Date | Payee name | Amount (\$) |
| 5/20/98 | KTBC-TV | \$4.25 |
| Payee address: City: State: Zip Code | | |
| 119 E. 10th Austin, TX 78701 | | |
| Purpose of expenditure | | -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought / held |
| Advertisement | | |

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POLITICAL EXPENDITURES

SCHEDULE F

| | | |
|--|--|---|
| The INSTRUCTION GUIDE explains how to complete this form. | | 1 Total pages Schedule F: |
| 2 FILER NAME <i>Todd Baxter</i> | | 3 ACCOUNT # (Ethics Commission filers) |
| 4 Date <i>6/7/98</i> | 5 Payee name <i>TXDOT</i> | 7 Amount (\$) <i>\$ 218.28</i> |
| 6 Payee address: City: State: Zip Code <i>12315 HWY 290 WEST AUSTIN, TX 78737</i> | | |
| 8 Purpose of expenditure <i>Sign Removal</i> | | 9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought / held |
| Date <i>6/9/98</i> | Payee name <i>Lone Star Productions</i> | Amount (\$) <i>\$ 1,160.00</i> |
| Payee address: City: State: Zip Code <i>1113 WEST ANNIE AUSTIN, TX 78704</i> | | |
| Purpose of expenditure <i>Advertisement</i> | | ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought / held |
| Date <i>6/22/98</i> | Payee name <i>Paragon Printing</i> | Amount (\$) <i>\$ 495.00</i> |
| Payee address: City: State: Zip Code <i>223 W. Anderson AUSTIN, TX 78759</i> | | |
| Purpose of expenditure <i>Mailer, Printing</i> | | ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought / held |
| Date <i>6/25/98</i> | Payee name <i>Eckerd's</i> | Amount (\$) <i>\$ 4.19</i> |
| Payee address: City: State: Zip Code <i>3201 Bee Caves AUSTIN, TX 78746</i> | | |
| Purpose of expenditure <i>Supplies</i> | | ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought / held |

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

| | | |
|--|--|--|
| The INSTRUCTION GUIDE explains how to complete this form. | | 1 Total pages Schedule F: |
| 2 FILER NAME <i>Todd Baxter</i> | | 3 ACCOUNT # (Ethics Commission filers) |
| 4 Date <i>6/28/98</i> | 5 Payee name <i>Postmaster</i> | 7 Amount (\$) <i>\$ 40.00</i> |
| 6 Payee address: City: State: Zip Code <i>3217 Bell CAVIS Austin, TX 78714</i> | | |
| 8 Purpose of expenditure <i>PO Box Rental</i> | | 9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought / held |
| Date <i>5/21/98</i> | Payee name <i>GTE</i> | Amount (\$) <i>\$ 395.00</i> |
| Payee address: City: State: Zip Code <i>P.O. BOX 33049 St. Petersburg, Fla. 33733</i> | | |
| Purpose of expenditure <i>Phone Expense</i> | | -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought / held |
| Date <i>6/28/98</i> | Payee name <i>GTE</i> | Amount (\$) <i>\$ 52.41</i> |
| Payee address: City: State: Zip Code <i>P.O. BOX 33049 St. Petersburg, Fla. 33733</i> | | |
| Purpose of expenditure <i>Phone Expense</i> | | -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought / held |
| Date <i>4/7/98</i> | Payee name <i>Time Warner Cable</i> | Amount (\$) <i>\$ 3466.00</i> |
| Payee address: City: State: Zip Code <i>12012 N. Mopac Austin, TX 78750</i> | | |
| Purpose of expenditure <i>Advertisement</i> | | -- 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: |
| 2 FILER NAME | | 3 ACCOUNT # (Ethics Commission filers) |
| 4 Date | 5 Payee name | 7 Amount (\$) |
| 6/17/98 | Hill's Services | 1800.00 |
| 6 Payee address: City: State: Zip Code | | |
| P.O. BOX 144451 Austin, TX 78714 | | |
| 8 Purpose of expenditure | | 9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held |
| Data Services | | |
| 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 |
| 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 |
| 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 |

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED