

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## 4146 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:  
23

3 CANDIDATE / OFFICEHOLDER NAME

TITLE FIRST MI  
Clemence M.  
NICKNAME LAST SUFFIX  
"Bud" Schauerte

OFFICE USE ONLY

Date Received: OCT 5 10 17 AM '98  
FILED

4 CANDIDATE / OFFICEHOLDER ADDRESS

ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE  
8501A Cima Oak Lane  
Austin TX 78759

Change of Address

5 CAMPAIGN TREASURER NAME

TITLE FIRST MI  
Ann F.  
NICKNAME LAST SUFFIX  
Schauerte

Receipt #  
HD / PM Amount  
Date Processed  
Date Imaged

6 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE  
8501A Cima Oak Lane  
Austin TX 78759

7 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION  
( 512 ) 794-0555

8 REPORT TYPE

January 15  30th day before election  Runoff  15th day after campaign treasurer appointment (officeholder only)  
 July 15  8th day before election  Exceeded \$500 limit  Final report (Attach C/OH - FR)

9 PERIOD COVERED

Month Day Year THROUGH Month Day Year  
7 / 16 / 98 THROUGH 10 / 4 / 98

10 ELECTION

ELECTION DATE: Month Day Year  
11 / 3 / 98  
ELECTION TYPE:  Primary  Runoff  General  Special

11 OFFICE

OFFICE HELD (if any)

12 OFFICE SOUGHT (if known)

Travis County Clerk

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  
NA

Address / PO Box: Apt / Suite #: City: State: Zip Code

additional pages

COON COUNTY TEXAS  
OCT 5 10 16 AM '98

GO TO PAGE 2

FILED

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

14 C/OH NAME

Clemence M. (Bud) Schauerte

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

COMMITTEE NAME

none

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

additional pages

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)

\$ 8459.98

EXPENDITURE  
TOTALS

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

\$ ---

4. TOTAL POLITICAL EXPENDITURES

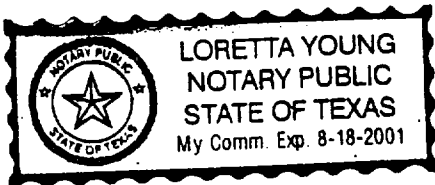
\$ 17,186.78

OUTSTANDING  
LOAN TOTALS

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

\$ 25,000.00

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.

*C. M. Schauerte*

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Clemence M. Schauerte this the 5th day of Oct, 1998, to certify which, witness my hand and seal of office.

*Loretta Young*  
Signature of officer administering oath

Loretta Young  
Print name of officer administering oath

Laura Closing Specialist  
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:

1 of 13 pages

2 FILER NAME

Bud Schauerte

3 ACCOUNT # (Ethics Commission files)

4 Date

8-15-98

5 Full name of contributor

Gib Lewis

out of state PAC

7 Amount of contribution (\$)

\$100.00

8 In-kind contribution description (if applicable)

6 Contributor address: City: State: Zip Code

P.O. Box 3158  
Austin TX 78764

9 Principal occupation

Lobbyist

10 Employer (optional)

Date

7-30-98

Full name of contributor

Friends of Kirk Ingels

out of state PAC

Amount of contribution (\$)

\$200.00

In-kind contribution description (if applicable)

Contributor address: City: State: Zip Code

2525 Wallingwood Drive  
Austin TX 78746-6921

Principal occupation

Insurance & investments

Employer (optional)

Date

7-24-98

Full name of contributor

Chuck Rice Jr.

out of state PAC

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

Contributor address: City: State: Zip Code

P.O. Box 14188  
Austin TX 78714-1488

Principal occupation

Lobbyist

Employer (optional)

Date

7-22-98

Full name of contributor

Nelson Puette

out of state PAC

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

Contributor address: City: State: Zip Code

P.O. Box 9038  
Austin TX 78766

Principal occupation

Real Estate

Employer (optional)

Date

7-28-98

Full name of contributor

Richard M. Powell

out of state PAC

Amount of contribution (\$)

\$25.00

In-kind contribution description (if applicable)

Contributor address: City: State: Zip Code

3305 Bridle Path  
Austin TX 78703

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 of 13 pages

2 FILERNAME

Bud Schauerte

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Full name of contributor

out of state PAC

8-12-98

Steve Rosanky

7 Amount of contribution (\$)

\$100.00

8 In-kind contribution description (if applicable)

6 Contributor address: City, State, Zip Code

500 South Congress - #219  
Austin TX 78704

9 Principal occupation

10 Employer (optional)

Date

Full name of contributor

out of state PAC

8-17-98

Robert A. Cameron

Amount of contribution (\$)

\$1000.00

In-kind contribution description (if applicable)

Contributor address: City, State, Zip Code

9-18-98

3897 Mission Hills Dr.  
Northbrook IL 60062

2000.00

Principal occupation

Employer (optional)

Circular Corp. Pres.

Date

Full name of contributor

out of state PAC

9-5-98

Hector and Arleigh DeLeon

Amount of contribution (\$)

\$125.00

In-kind contribution description (if applicable)

Contributor address: City, State, Zip Code

3 Leopold Lane  
Austin TX 78746-3115

Principal occupation

Employer (optional)

Attorney

Date

Full name of contributor

out of state PAC

7-27-98

Associated Republicans of Texas

Amount of contribution (\$)

\$79.98

In-kind contribution description (if applicable)

Contributor address: City, State, Zip Code

807 Brazos - Suite 601  
Austin TX 78701

Principal occupation

Employer (optional)

Date

Full name of contributor

out of state PAC

9-9-98

Austin Republican Women

Amount of contribution (\$)

\$200.00

In-kind contribution description (if applicable)

Contributor address: City, State, Zip Code

11109 Grapevine Lane  
Austin TX 78759-4739

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:  
3 of 13 pages

2 FILER NAME

Bud Schauerte

3 ACCOUNT # (Ethics Commission files)

4 Date

9-14-98

5 Full name of contributor

Gary P. Pearson

out of state PAC

7 Amount of contribution (\$)

\$20.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

2041 Westcreek Lane - Su. 54-D  
Houston TX 77027

9 Principal occupation

Political/Govt. consulting

10 Employer (optional)

Date

9-14-98

Full name of contributor

William Ross

out of state PAC

Amount of contribution (\$)

\$15.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

2101 Brandywine Ln.  
Austin TX 78727

Principal occupation

Employer (optional)

Date

9-15-98

Full name of contributor

Northwest Austin Republican Women

out of state PAC

Amount of contribution (\$)

\$400.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

PAC Fund  
12811 Moderna Tr.  
Austin TX 78729-7363

Principal occupation

Employer (optional)

Date

9-16-98

Full name of contributor

John N. Doggett, III

out of state PAC

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

32 Sundown Parkway  
Austin TX 78746

Principal occupation

Attorney/Radio show host

Employer (optional)

Date

9-21-98

Full name of contributor

Frances R. Dudley

out of state PAC

Amount of contribution (\$)

\$30.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

2811 Rock Terrace Drive  
Austin TX 78704

Principal occupation

insurance administration

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:  
4 of 13 pages

2 FILER NAME

Bud Schauerte

3 ACCOUNT # (Ethics Commission filers)

4 Date

9-18-98

5 Full name of contributor

L. Kent Abney

out of state PAC

7 Amount of contribution (\$)  
\$25.00

8 In-kind contribution description (if applicable)

6 Contributor address: City, State, Zip Code

81 Pascal Lane  
Austin TX 78746

9 Principal occupation

Tax & estate planning

10 Employer (optional)

The Equitable

Date

9-29-98

Full name of contributor

Kent Hance

out of state PAC

Amount of contribution (\$)  
\$100.00

In-kind contribution description (if applicable)

Contributor address: City, State, Zip Code

111 Congress Ave - Su 800  
Austin TX 78701-4043

Principal occupation

Attorney

Employer (optional)

self employed

Date

9-30-98

Full name of contributor

Kirk Overbey

out of state PAC

Amount of contribution (\$)  
\$25.00

In-kind contribution description (if applicable)

Contributor address: City, State, Zip Code

6306 Leatherwood Cove  
Austin TX 78759

Principal occupation

Investment consultant

Employer (optional)

Date

9-29-98

Full name of contributor

Wayne J. Thorburn

out of state PAC

Amount of contribution (\$)  
\$50.00

In-kind contribution description (if applicable)

Contributor address: City, State, Zip Code

8717 Wildridge Drive  
Austin TX 78759

Principal occupation

Real Estate Commission

Employer (optional)

Date

10-2-98

Full name of contributor

Jay Howard

out of state PAC

Amount of contribution (\$)  
\$150.00

In-kind contribution description (if applicable)

Contributor address: City, State, Zip Code

823 Congress Ave, Su. 900  
Austin TX 78701

Principal occupation

Lobbyist

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:  
5 of 13 pages

2 FILER NAME

Bud Schauerte

3 ACCOUNT # (Ethics Commission files)

4 Date

9-27-98

5 Full name of contributor

Carlos T. Garza

out of state PAC

7 Amount of  
contribution (\$)  
\$20.00

8 In-kind contribution  
description (if applicable)

6 Contributor address: City: State: Zip Code

7744 Northcross Dr. #N101  
Austin TX 78757

9 Principal occupation

Dispatcher

10 Employer (optional)

Date

9-30-98

Full name of contributor

Jay Brummett

out of state PAC

Amount of  
contribution (\$)  
\$50.00

In-kind contribution  
description (if applicable)

Contributor address: City: State: Zip Code

7604 Fireoak Dr.  
Austin TX 78759

Principal occupation

Real Estate Commissioner

Employer (optional)

Date

9-30-98

Full name of contributor

DeWayne D. Naumann

out of state PAC

Amount of  
contribution (\$)  
\$50.00

In-kind contribution  
description (if applicable)

Contributor address: City: State: Zip Code

P.O. Box 143092  
Austin TX 78714-3092

Principal occupation

Insurance Co. Executive

Employer (optional)

Date

9-30-98

Full name of contributor

Eugene Wallace Collins

out of state PAC

Amount of  
contribution (\$)  
\$25.00

In-kind contribution  
description (if applicable)

Contributor address: City: State: Zip Code

1701 Wild Basin Ledge  
Austin TX 78746

Principal occupation

Retired

Employer (optional)

Date

9-30-98

Full name of contributor

Ray E. Vaughan

out of state PAC

Amount of  
contribution (\$)  
\$50.00

In-kind contribution  
description (if applicable)

Contributor address: City: State: Zip Code

204 Etta Place  
Austin TX 78753

Principal occupation

Financial Planner/Instructor

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:

6 of 13 pages

2 FILER NAME

Bud Schauerte

3 ACCOUNT # (Ethics Commission files)

4 Date

9-24-98

5 Full name of contributor

Billy W. Clayton

out of state PAC

7 Amount of  
contribution (\$)  
\$50.00

8 In-kind contribution  
description (if applicable)

6 Contributor address; City; State; Zip Code

1122 Colorado - Ste #307  
Austin TX 78701

9 Principal occupation

Lobbyist

10 Employer (optional)

Date

9-23-98

Full name of contributor

A.R. Schwartz

out of state PAC

Amount of  
contribution (\$)  
\$25.00

In-kind contribution  
description (if applicable)

Contributor address; City; State; Zip Code

P.O. Box 3398  
Galveston TX 77552-0398

Principal occupation

Lobbyist

Employer (optional)

Date

9-26-98

Full name of contributor

Ray Barnhart

out of state PAC

Amount of  
contribution (\$)  
\$50.00

In-kind contribution  
description (if applicable)

Contributor address; City; State; Zip Code

6205 Rain Creek Parkway  
Austin TX 78759

Principal occupation

Transportation consultant

Employer (optional)

Date

9-25-98

Full name of contributor

Col. and Mrs. John V. Larson

out of state PAC

Amount of  
contribution (\$)  
\$25.00

In-kind contribution  
description (if applicable)

Contributor address; City; State; Zip Code

6316 Needham Lane  
Austin TX 78739-1509

Principal occupation

retired

Employer (optional)

Date

9-24-98

Full name of contributor

Col. and Mrs. L.C. Bradley, Jr.

out of state PAC

Amount of  
contribution (\$)  
\$25.00

In-kind contribution  
description (if applicable)

Contributor address; City; State; Zip Code

9201 Cedar Forest Drive  
Austin TX 78750-2911

Principal occupation

retired

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:  
7 of 13 pages

2 FILERNAME

Bud Schauerte

3 ACCOUNT # (Ethics Commission filers)

4 Date

9-27-98

5 Full name of contributor

Milton and Ruth Fox

out of state PAC

7 Amount of  
contribution (\$)  
\$50.00

8 In-kind contribution  
description (if applicable)

6 Contributor address: City, State, Zip Code

6010 Cape Coral  
Austin TX 78746

9 Principal occupation

Retired

10 Employer (optional)

Date

9-28-98

Full name of contributor

Albert W. Holmes

out of state PAC

Amount of  
contribution (\$)  
\$100.00

In-kind contribution  
description (if applicable)

Contributor address: City, State, Zip Code

7800 Shoal Creek Blvd, #239-S  
Austin TX 78757

Principal occupation

Attorney

Employer (optional)

Self employed

Date

9-29-98

Full name of contributor

Frances and Jack Colby

out of state PAC

Amount of  
contribution (\$)  
\$50.00

In-kind contribution  
description (if applicable)

Contributor address: City, State, Zip Code

2403 Homedale Circle  
Austin TX 78704

Principal occupation

Retired

Employer (optional)

Date

9-28-98

Full name of contributor

Gen. Robert Bernstein

out of state PAC

Amount of  
contribution (\$)  
\$30.00

In-kind contribution  
description (if applicable)

Contributor address: City, State, Zip Code

3805 Greystone  
Austin TX 78731-1505

Principal occupation

retired military

Employer (optional)

Date

9-26-98

Full name of contributor

Carl and Pia Schlaepfer

out of state PAC

Amount of  
contribution (\$)  
\$100.00

In-kind contribution  
description (if applicable)

Contributor address: City, State, Zip Code

3902 Sidehill Path  
Austin TX 78731

Principal occupation

retired

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:

8 of 13 pages

2 FILER NAME

Bud Schauerte

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Full name of contributor

out of state PAC

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

7-27-98

Associated Republicans of Texas

\$400.00

9-24-98

6 Contributor address: City: State: Zip Code

\$250.00

807 Brazos - Su 601  
Austin TX 78701

9 Principal occupation

10 Employer (optional)

Date

Full name of contributor

out of state PAC

Amount of contribution (\$)

In-kind contribution description (if applicable)

9-3-98

Erma Carpenter

\$20.00

Contributor address: City: State: Zip Code

6100 Skahan Lane  
Austin TX 78739

Principal occupation

Retired

Employer (optional)

Date

Full name of contributor

out of state PAC

Amount of contribution (\$)

In-kind contribution description (if applicable)

8-31-98

Billy and Bette Millis

\$50.00

Contributor address: City: State: Zip Code

2502 Barkwood Drive  
Austin TX 78748

Principal occupation

Retired

Employer (optional)

Date

Full name of contributor

out of state PAC

Amount of contribution (\$)

In-kind contribution description (if applicable)

7-16-98

Joseph & Nancy I Bergeron

\$25.00

Contributor address: City: State: Zip Code

4301 Sendero  
Austin TX 78735

Principal occupation

Employer (optional)

Date

Full name of contributor

out of state PAC

Amount of contribution (\$)

In-kind contribution description (if applicable)

8-12-98

Mack C. Lindsey

\$50.00

Contributor address: City: State: Zip Code

6675 Whitemarsh Valley Walk  
Austin TX 78746

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: 9 of 13 pages	
2 FILERNAME Bud Schauerte		3 ACCOUNT # (Ethics Commission filers)	
4 Date 10-1-98	5 Full name of contributor Lee Phillips <input type="checkbox"/> out of state PAC 6 Contributor address, City, State, Zip Code 4107 Medical Parkway, Ste. 201 Austin TX 78756	7 Amount of contribution (\$) \$15.00	8 In-kind contribution description (if applicable)
9 Principal occupation		10 Employer (optional)	
Date 10-1-98	Full name of contributor LTC Carolyn G. Knight (Ret) <input type="checkbox"/> out of state PAC Contributor address, City, State, Zip Code 2203 Onion Creek Parkway, Unit 22 Austin TX 78747-1651	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation Retired military		Employer (optional)	
Date 9-29-98	Full name of contributor Robert L. Cartledge, Jr. <input type="checkbox"/> out of state PAC Contributor address, City, State, Zip Code 2910 Stoneway Austin TX 78757	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation		Employer (optional)	
Date 10-2-98	Full name of contributor Dick Brown <input type="checkbox"/> out of state PAC Contributor address, City, State, Zip Code 106 Wood Trail Austin TX 78746	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation Lobbyist		Employer (optional)	
Date 10-3-98	Full name of contributor John Adams <input type="checkbox"/> out of state PAC Contributor address, City, State, Zip Code P.O. Box 5588 Austin TX 78763	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation spice & extract distributor		Employer (optional)	
<p>ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

10 of 13 pages

2 FILERNAME

Bud Schauerte

3 ACCOUNT # (Ethics Commission filers)

4 Date

8-27-98

5 Full name of contributor

Keith B & Brenda M. Hill

out of state PAC

7 Amount of contribution (\$)

\$25.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

4148 Travis County Circle  
Austin TX 78735

9 Principal occupation

10 Employer (optional)

Date

8-15-98

Full name of contributor

Joanna Clardy

out of state PAC

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

6723 Beauford Drive  
Austin TX 78750

Principal occupation

Employer (optional)

Date

8-24-98

Full name of contributor

Mr & Mrs. F.W. Hendrix, Jr.

out of state PAC

Amount of contribution (\$)

\$50.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

2500 Spring Creek Drive  
Austin TX 78704

Principal occupation

Retired

Employer (optional)

Date

8-20-98

Full name of contributor

Robert & Becky Vann

out of state PAC

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

10-3-98

10801 Rush Road  
Austin TX 78732

\$100.00

Principal occupation

Constable Pct. 2

Employer (optional)

Date

8-18-98

Full name of contributor

David & Claudette Hartman

out of state PAC

Amount of contribution (\$)

\$500.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

2509 Scenic Drive  
Austin TX 78703

Principal occupation

Banker

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:

11 of 13 pages

2 FILERNAME

Bud Schauerte

3 ACCOUNT # (Ethics Commission files)

4 Date

9-11-98

5 Full name of contributor

 out of state PAC

Hill Country Republican Women PAC

7 Amount of contribution (\$)

\$75.00

8 In-kind contribution description (if applicable)

6 Contributor address: City: State: Zip Code

8300 Zyle Rd.  
Austin TX 78737

9 Principal occupation

10 Employer (optional)

Date

9-24-98

Full name of contributor

 out of state PAC

Peter Fazziola

Amount of contribution (\$)

\$20.00

In-kind contribution description (if applicable)

Contributor address: City: State: Zip Code

P.O. Box 7192  
Austin TX 78713

Principal occupation

administrator/supervisor

Employer (optional)

Date

9-24-98

Full name of contributor

 out of state PAC

Marvin Collins

Amount of contribution (\$)

\$25.00

In-kind contribution description (if applicable)

Contributor address: City: State: Zip Code

P.O. Box 27018  
Austin TX 78755

Principal occupation

retired

Employer (optional)

Date

9-24-98

Full name of contributor

 out of state PAC

Jonathan E. Bellin

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

Contributor address: City: State: Zip Code

10-3-98

10050 Great Hills Trail #306  
Austin TX 78759-5842

\$50.00

Principal occupation

businessman

Employer (optional)

Date

9-24-98

Full name of contributor

 out of state PAC

Norman and Barbara Newton

Amount of contribution (\$)

\$50.00

In-kind contribution description (if applicable)

Contributor address: City: State: Zip Code

5809 Highland Hills Drive  
Austin TX 78731

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: 12 of 13 pages	
2 FILERNAME Bud Schauerte		3 ACCOUNT # (Ethics Commission filers)	
4 Date 10-3-98	5 Full name of contributor James A. Cooley <input type="checkbox"/> out of state PAC	7 Amount of contribution (\$) \$30.00	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 11000 Applewood Dr. Austin TX 78758			
9 Principal occupation free lance writer		10 Employer (optional)	
Date 10-3-98	Full name of contributor Tol S. Higginbotham <input type="checkbox"/> out of state PAC	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code P.O. Box 1050 Buda TX 78610			
Principal occupation		Employer (optional)	
Date 10-3-98	Full name of contributor George Jeffords <input type="checkbox"/> out of state PAC	Amount of contribution (\$) \$35.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 7602 Rockpoint Circle Austin TX 78731-1415			
Principal occupation		Employer (optional)	
Date 10-3-98	Full name of contributor Philip G. Savoy <input type="checkbox"/> out of state PAC	Amount of contribution (\$) \$30.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 901 Armadillo Rd. Austin TX 78745-3869			
Principal occupation		Employer (optional)	
Date 10-3-98	Full name of contributor Will W. Wilson Jr. <input type="checkbox"/> out of state PAC	Amount of contribution (\$) \$20.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 1407 Ethridge Austin TX 78703			
Principal occupation Attorney		Employer (optional)	
<p><b>ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

**SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

13 of 13 pages

2 FILERNAME

Bud Schauerte

3 ACCOUNT # (Ethics Commission files)

4 Date

10-3-98

5 Full name of contributor

Phil Arnold

 out of state PAC

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

\$20.00

6 Contributor address; City; State; Zip Code

 8532 N. Lamar  
Austin TX 78753

9 Principal occupation

10 Employer (optional)

Date

10-3-98

Full name of contributor

Ronald W. Servis

 out of state PAC

Amount of contribution (\$)

\$25.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

 P.O. Box 16655  
Austin TX 78761-6655

Principal occupation

Real estate

Employer (optional)

Date

8-28-98

Full name of contributor

Ray Vaughan

 out of state PAC

Amount of contribution (\$)

\$200.0

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

 204 Etta Place  
Austin TX 78753

Principal occupation

Financial advisor/college instructor

Employer (optional)

Date

Full name of contributor

 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

 out of state PAC

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

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.

# LOANS

# SCHEDULE E

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule E:

1 of 2 pages

2 FILERNAME

Bud Schauerte

3 ACCOUNT # (Ethics Commission filers)

4

TOTAL OF UNITEMIZED LOANS:    ⇨   ⇨   ⇨   ⇨   ⇨   ⇨

\$ 12,000

6 Date of loan

7-22-98

7 Name of lender

C.M. (Bud) Schauerte

out of state PAC

9 Loan Amount (\$)

\$ 3000.00

6 Is lender a financial institution?

Y

(N)

8 Lender address; City; State; Zip Code

8501A Cima Oak Lane  
Austin TX 78759

10 Interest rate

NA

11 Maturity date

12 Description of Collateral

none

13 GUARANTOR INFORMATION

not applicable

14 Name of guarantor

NA

15 Guarantor address; City; State; Zip Code

16 Amount Guaranteed (\$)

17 Principal Occupation

18 Employer

Date of loan

8-6-98

Name of lender

C.M. (Bud) Schauerte

out of state PAC

Loan Amount (\$)

\$3000.00

Is lender a financial institution?

Y

(N)

Lender address; City; State; Zip Code

8501A Cima Oak Lane  
Austin TX 78759

Interest rate

NA

Maturity date

Description of Collateral

none

GUARANTOR INFORMATION

not applicable

Name of guarantor

NA

Guarantor address; City; State; Zip Code

Amount Guaranteed (\$)

Principal Occupation

Employer

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED  
If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.



# LOANS

# SCHEDULE E

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule E:  
2 of 2 pages

2 FILERNAME

Bud Schauerte

3 ACCOUNT # (Ethics Commission filers)

4

TOTAL OF UNITEMIZED LOANS:    ⇨   ⇨   ⇨   ⇨   ⇨   ⇨

\$

5 Date of loan

8-16-98

7 Name of lender

C.M. (Bud) Schauerte

out of state PAC

9 Loan Amount (\$)

\$6,000.00

6 Is lender a financial institution?

Y

N

8 Lender address;    City;    State;    Zip Code

8501A Cima Oak Lane  
Austin TX 78759

10 Interest rate

---

11 Maturity date

---

12 Description of Collateral

none

13 GUARANTOR INFORMATION

14 Name of guarantor

NA

16 Amount Guaranteed (\$)

not applicable

15 Guarantor address;    City;    State;    Zip Code

17 Principal Occupation

18 Employer

Date of loan

Name of lender

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

none

GUARANTOR INFORMATION

Name of guarantor

Amount Guaranteed (\$)

not applicable

Guarantor address;    City;    State;    Zip Code

Principal Occupation

Employer

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED  
If lender 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:  
1 of 4

2 FILERNAME **Bud Schauerte** 3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name	7 Amount (\$)
8-27 & 9-1 1998	Quik Print ..... 6 Payee address: City, State, Zip Code	\$71.34
9-17-98	803 Brazos Austin TX 78701	\$29.77

8 Purpose of expenditure: **Photocopies** 9 -- Complete if direct expenditure to benefit C/OH --  
Candidate / Officeholder name: **Bud Schauerte, Travis County Clk.** Office sought / held

Date	Payee name	Amount (\$)
9-21-98	Thomas Graphics Inc. ..... Payee address: City, State, Zip Code 9501 North IH-35 Austin TX 78753	\$1991.80

Purpose of expenditure: **Political Printing** -- Complete if direct expenditure to benefit C/OH --  
Candidate / Officeholder name: **Bud Schauerte, Travis County Clk.** Office sought / held

Date	Payee name	Amount (\$)
9-21-98	U.S. Post Master ..... Payee address: City, State, Zip Code U.S. Postal Service Austin TX 78701	\$425.25

Purpose of expenditure: **Postage** -- Complete if direct expenditure to benefit C/OH --  
Candidate / Officeholder name: **Bud Schauerte, Travis County Clk.** Office sought / held

Date	Payee name	Amount (\$)
9-28-98	Paragon Printing & Mailing ..... Payee address: City, State, Zip Code P.O. Box 15988 Austin TX 78761	\$649.80
10-1-98		\$1000.00

Purpose of expenditure: **Print, process; & Distribute political brochures** -- Complete if direct expenditure to benefit C/OH --  
Candidate / Officeholder name: **Bud Schauerte, Travis County Clk.** 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 of 4
2 FILERNAME Bud Schauerte		3 ACCOUNT # (Ethics Commission filers)
4 Date	5 Payee name	7 Amount (\$)
9-6-98	James A. Cooley	\$130.00
8-24-98	.....	\$120.00
9-30-98	6 Payee address: City: State: Zip Code	\$180.00
8-5-98	11000 Applewood Dr.	\$80.00
9-21-98	Austin TX 78758-8839	\$170.00
8 Purpose of expenditure Sign Erection		9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name: Office sought / held Bud Schauerte Travis Co. Clerk
Date	Payee name	Amount (\$)
9-2-98	Banner Sign Graphics	\$419.28
7-16-98	.....	\$500.00
	6 Payee address: City: State: Zip Code	
	650 Canon St.	
	Austin TX 78752	
Purpose of expenditure Political signs		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name: Office sought / held Bud Schauerte Travis County Clk.
Date	Payee name	Amount (\$)
8-28-98	Kenneth Bell	\$14.06
	.....	
	6 Payee address: City: State: Zip Code	
	5006 Evans	
	Austin TX 78751	
Purpose of expenditure Office supplies reimbursement		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name: Office sought / held Bud Schauerte Travis County Clerk
Date	Payee name	Amount (\$)
8-28-98	Ray Vaughan	\$318.32
7-28.1998	.....	\$198.00
	6 Payee address: City: State: Zip Code	
	204 Etta Place	
	Austin TX 78753	
Purpose of expenditure Texas Open Records Research		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name: Office sought / held Bud Schauerte Travis County Clerk

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**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

3 of 4

2 FILERNAME

Bud Schauerte

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Payee name

7 Amount  
(\$)

8-7-98

Mr. Cassette of Texas

\$40.59

6 Payee address; City; State; Zip Code

7-16-98

4922 Burnet Rd  
Austin TX 78756-2610

\$27.06

8 Purpose of expenditure

Audio Cassettes

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

Office sought / held

Bud Schauerte - Travis County Clerk

Date

Payee name

Amount  
(\$)

7-23-98

Home Depot

\$420.77

Payee address; City; State; Zip Code

7-17-98

10107 Research  
Austin TX 78759

\$581.10

Purpose of expenditure

Wooden stakes &amp; nails

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

Office sought / held

Bud Schauerte - Travis County Clerk

Date

Payee name

Amount  
(\$)

7-28-98

Noelle Vaughan

\$375.00

Payee address; City; State; Zip Code

204 Etta Place  
Austin TX 78753

Purpose of expenditure

Financial analysis

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

Office sought / held

Bud Schauerte - Travis County Clerk

Date

Payee name

Amount  
(\$)

6-16-98

Bill Carlon

\$1500.00

Payee address; City; State; Zip Code

2901 Barton Skyway  
Austin TX 78746

Purpose of expenditure

Political Consulting

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

Office sought / held

Bud Schauerte - Travis County Clerk

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: 4 of 4
2 FILERNAME Bud Schauerte		3 ACCOUNT # (Ethics Commission filers) 4 of 4
4 Date 10-3-98	5 Payee name Jack and Joan Otto 6 Payee address: City, State, Zip Code 4812 Twin Valley Drive Austin TX 78731	7 Amount (\$) \$348.26
8 Purpose of expenditure Reimbursement for deli & reception expenses		9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Bud Schauerte - Travis County Clerk Office sought / held
Date 8-25-98	Payee name Paragon Printing & Mailing Payee address: City, State, Zip Code	Amount (\$) \$2753.38
8-11-98	P.O. Box 15988 Austin TX 78761	\$3893.00
Purpose of expenditure Printing and mailing		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Bud Schauerte - Travis County Clerk Office sought / held
Date 8-23-98	Payee name Julie Yioutas Payee address: City, State, Zip Code 4201 Monterey Oaks Blvd. #718 Austin TX 78746	Amount (\$) \$500.00
Purpose of expenditure Brochure/adv. design		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Bud Schauerte - Travis County Clerk Office sought / held
Date 8-27-98	Payee name Kenneth Bell Payee address: City, State, Zip Code	Amount (\$) \$250.00
9-30-98	5006 Evans Austin TX 78751	\$200.00
Purpose of expenditure Political Consulting		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Bud Schauerte - Travis County Clerk Office sought / held

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**POLITICAL EXPENDITURES  
MADE FROM PERSONAL FUNDS**

**SCHEDULE G**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule G:  
1 of 2 pages

2 FILERNAME

Bud Schauerte

3 ACCOUNT # (Ethics Commission filers)

4 Date  
7-15-98

5 Payee name  
Travis County government  
6 Payee address: City, State, Zip Code

Travis County court House

7 Purpose of expenditure  
Audio tape acquired through Texas Open  
Records Act

8 Amount (\$)  
\$1.40  
 Reimbursement from political contributions intended

Date  
8-10-98  
7-29-98

Payee name  
U.S. Post Office  
Payee address: City, State, Zip Code

Northwest station  
Austin TX

Purpose of expenditure  
Stamps and Certified Mail to Sec. of State

Amount (\$)  
\$67.46  
 Reimbursement from political contributions intended

Date  
7-15-98

Payee name  
Notary Public  
Payee address: City, State, Zip Code  
Travis County Court House

Purpose of expenditure  
Notarize Candidate's financial report

Amount (\$)  
\$3.00  
 Reimbursement from political contributions intended

Date  
9-1-98

Payee name  
Travis County Clerk's Office  
Payee address: City, State, Zip Code  
Travis county Court House  
Austin TX 78701

Purpose of expenditure  
Photocopy ballot applications/names

Amount (\$)  
\$27.00  
 Reimbursement from political contributions intended

Date  
8-15-98

Payee name  
Office Depot  
Payee address: City, State, Zip Code  
4501 West Braker Lane  
Austin TX 78759

Purpose of expenditure  
Office supplies

Amount (\$)  
\$75.73  
 Reimbursement from political contributions intended

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

**SCHEDULE G**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule G:  
2 of 2 pages

2 FILERNAME

Bud Schauerte

3 ACCOUNT # (Ethics Commission files)

4 Date	5 Payee name	8 Amount (\$)
9-15-98	Quik Print	\$10.31
9-17-98	6 Payee address: City, State, Zip Code	.76
9-21-98	803 Brazos Austin TX 78701	\$2.42
	7 Purpose of expenditure	<input type="checkbox"/> Reimbursement from political contributions intended
	Photocopies	

Date	Payee name	Amount (\$)
9-21-98	PaperPlus	\$5.41
	6 Payee address: City, State, Zip Code	
	5555 N. Larar # B110 Austin TX 78751	
	7 Purpose of expenditure	<input type="checkbox"/> Reimbursement from political contributions intended
	envelopes	

Date	Payee name	Amount (\$)
9-24-98	Office Depot	\$18.24
	6 Payee address: City, State, Zip Code	
	8752 Research Austin TX 78758	
	7 Purpose of expenditure	<input type="checkbox"/> Reimbursement from political contributions intended
	Office supplies	

Date	Payee name	Amount (\$)
	.....	
	6 Payee address: City, State, Zip Code	
	7 Purpose of expenditure	<input type="checkbox"/> Reimbursement from political contributions intended

Date	Payee name	Amount (\$)
	.....	
	6 Payee address: City, State, Zip Code	
	7 Purpose of expenditure	<input type="checkbox"/> Reimbursement from political contributions intended

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED