Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512)463-5800 1-800-325-8506

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

4701

FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT # (Ethics Commission filers): 00038197

2 Total pages this report: 1/33

OFFICE USE ONLY

Date Received: FILED OCT 10 4 49 PM '00 COUNTY CLERK DAVIS COUNTY, TEXAS

Date Hand-delivered or Date postmarked

Receipt # | Amount

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

TITLE | FIRST: Ronald D. | MI

NICKNAME | LAST: Earle | SUFFIX

4 CANDIDATE / OFFICEHOLDER ADDRESS

☐ Change of Address

ADDRESS / PO BOX: P. O. Box 2092 | APT / SUITE #: | CITY: Austin | STATE: TX | ZIP CODE: 78768

5 CAMPAIGN TREASURER NAME

TITLE | FIRST: Joe | MI

NICKNAME | LAST: Long | SUFFIX

6 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE): 919 Congress Avenue Suite 1000 | APT / SUITE #: | CITY: Austin | STATE: TX | ZIP CODE: 78701

7 CAMPAIGN TREASURER PHONE

AREA CODE: (512) | PHONE NUMBER: 495-1554 | EXTENSION

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: 07/01/2000 THROUGH Month Day Year: 09/28/2000

10 ELECTION

ELECTION DATE Month Day Year: 11/07/2000

ELECTION TYPE: ☐ Primary ☐ Runoff ☒ General ☐ Special

11 OFFICE

OFFICE HELD (if any): District Attorney 53

12 OFFICE SOUGHT (if known): District Attorney 53

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

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512)463-5800 1-800-325-8506

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME
Ronald D. Earle

15 ACCOUNT # (Ethics Commission filers)
00038197

16 NOTICE FROM 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
☐ GENERAL	COMMITTEE ADDRESS
☐ SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages

17 NO REPORTABLE ACTIVITY

☐ Check here if no reportable activity occured during this reporting period. (Sign affidavid 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	$ 1300.00
	2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 43725.00
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$ 350.31
	4.	**TOTAL POLITICAL EXPENDITURES**	$ 34804.87
OUTSTANDING LOAN TOTALS	5.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 0.00

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.

Signature of Candidate or Officeholder

(Effective 11/16/1999)

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME
Ronald D. Earle

15 ACCOUNT # (Ethics Commission filers)
00038197

16 NOTICE FROM POLITICAL COMMITTEE(S)

•• This box is for notice of political expenditures by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ••

COMMITTEE TYPE
☐ GENERAL
☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

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	$ 1300.00
2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 43725.00

EXPENDITURE TOTALS

3.	TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$ 350.31
4.	**TOTAL POLITICAL EXPENDITURES**	$ 34804.87

OUTSTANDING LOAN TOTALS

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

19 AFFIDAVIT

NOTARY PUBLIC STATE OF TEXAS
GLORIA R. MONCIVAIS
Notary Public, State of Texas
My Commission Expires
MAY 27, 2003

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.

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the 10th day of October, 2002, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Gloria R Moncivais — Printed name of officer administering oath | Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 3/33

2 FILER NAME
Ronald D. Earle

3 ACCOUNT # (Ethics Commission filers)
00038197

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
08/29/2000	AFL-CIO P. O. Box 12727 Austin TX 78711	250.00	

9 Principal occupation (Optional)	10 Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/28/2000	Kent Ancshutz 1012 Rio Grande Austin TX 78701	250.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/20/2000	James Armstrong 2518 El Greco Cove Austin TX 78703	100.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/25/2000	Ausley,Algert & Robert,L.L.P. 3307 Northland Suite 420 Austin TX 78731	500.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/14/2000	Ross Baldwin 7609 Islander Austin TX 78749	100.00	

Principal occupation (Optional)	Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 4/33

2 FILER NAME
Ronald D. Earle

3 ACCOUNT # (Ethics Commission filers)
00038197

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
09/25/2000	Gerald Baum 8608 Tallwood Drive Austin TX 78759	100.00	
9 Principal occupation (Optional)	10 Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/22/2000	Betty Blackwell 1306 Nueces St. Austin TX 78701	500.00	
Principal occupation (Optional)	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/06/2000	Tom Bond 616 Congress Avenue Suite 1900 Austin TX 78701	250.00	
Principal occupation (Optional)	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/21/2000	Cathy Bonner P. O. Box 50381 Austin TX 78763	100.00	
Principal occupation (Optional)	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/25/2000	O. Philip Breland Jr. 1516 Parkway Austin TX 78703	100.00	
Principal occupation (Optional)	Employer (Optional)		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 5/33

2 FILER NAME
Ronald D. Earle

3 ACCOUNT # (Ethics Commission filers)
00038197

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
09/22/2000	Russell Bridges 6405 Cascada Dr. Austin TX 78750	100.00	
9 Principal occupation (Optional)		10 Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/21/2000	John Burns 3104 Pleasant Run Pl. Austin TX 78703	250.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
08/22/2000	Amon Burton 1306 Guadalupe Street Austin TX 78701	250.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
08/09/2000	John Butler 700 Lavaca Suite 1550 Austin TX 78701	100.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/27/2000	John Campbell 805 W. 10th Street Suite 400 Austin TX 78701	1000.00	
Principal occupation (Optional)		Employer (Optional)	

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 (512)463-5800 1-800-325-8506

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 6/33

2 FILER NAME
Ronald D. Earle

3 ACCOUNT # (Ethics Commission filers)
00038197

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
09/22/2000	Bob and Judy Carr 6 Contributor address; City; State; Zip Code 4826 Hwy 71 Del Valle TX 78617	250.00	
9 Principal occupation (Optional)		10 Employer (Optional)	

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/06/2000	James and Karen Carruth Contributor address; City; State; Zip Code 11100 Avering Lane Austin TX 78754	100.00	
Principal occupation (Optional)		Employer (Optional)	

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/23/2000	Roberto Chapa Contributor address; City; State; Zip Code 2516 Mountain View Drive Austin TX 78704	100.00	
Principal occupation (Optional)		Employer (Optional)	

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/20/2000	Gunter Christopher Contributor address; City; State; Zip Code 600 W. 9th Street Austin TX 78701	500.00	
Principal occupation (Optional)		Employer (Optional)	

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/22/2000	Suzanne Coleman Contributor address; City; State; Zip Code 121 Laurel Lane Austin TX 78705	250.00	
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 7/33

2 FILER NAME
Ronald D. Earle

3 ACCOUNT # (Ethics Commission filers)
00038197

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
09/25/2000	Jerry Conn 3219 Gilbert Street Austin TX 78703	150.00	
9 Principal occupation (Optional)		10 Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/20/2000	Bert Cromack 4016 Duval Street Austin TX 78751	100.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/20/2000	David Dobbs 9702 Swansons Ranch Road Austin TX 78748	100.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
08/29/2000	Sandy Dochen 5010 North Rim Drive Austin TX 78731	100.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/06/2000	Dunham Law Firm 400 W. 15th Street Suite 1410 Austin TX 78701	2000.00	
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 8/33

2 FILER NAME
Ronald D. Earle

3 ACCOUNT # (Ethics Commission filers)
00038197

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
09/18/2000	J. Clint Eisenberg 707 W. 34th Street Austin TX 78705	100.00	
09/28/2000	Fitzgerald and Meissner,P.C. 812 San Antonio St. Suite 400 Austin TX 78701	500.00	
09/28/2000	Philip Friday 700 San Antonio Austin TX 78701	100.00	
09/06/2000	Mark Alan Goldberg 120 Scorpion Drive Austin TX 78734	100.00	
09/25/2000	Ned Granger 605 W. 10th Street Austin TX 78701	1000.00	

9 Principal occupation (Optional)	10 Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 9/33

2 FILER NAME
Ronald D. Earle

3 ACCOUNT # (Ethics Commission filers)
00038197

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
09/14/2000	Beverly Griffith 3711 Taylors Drive Austin TX 78703	100.00	

9 Principal occupation (Optional)	10 Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/28/2000	Susan Gutzke 1602 E. 7th Street Austin TX 78702	100.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/20/2000	Thomas Henderson P. O. Box 1415 Austin TX 78767	250.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/28/2000	John Lee Hildreth 609 West 32nd Street Austin TX 78705	100.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/24/2000	Thanh Hodinh 11101 Heron Cove Austin TX 78759	100.00	

Principal occupation (Optional)	Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 10/33

2 FILER NAME
Ronald D. Earle

3 ACCOUNT # (Ethics Commission filers)
00038197

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
09/26/2000	Robert Icenhauer-Ramirez 1103 Nueces Austin TX 78701	250.00	
9 Principal occupation (Optional)	10 Employer (Optional)		
09/21/2000	Rowland Cook and Ireson Diane 2900 Wade Avenue Austin TX 78703	100.00	
Principal occupation (Optional)	Employer (Optional)		
09/22/2000	Tommy Jacks 111 Congress Avenue Suite 1010 Austin TX 78701	5000.00	
Principal occupation (Optional)	Employer (Optional)		
09/23/2000	Retta Kelly 2603 Plumcreek Austin TX 78703	75.00	
Principal occupation (Optional)	Employer (Optional)		
09/27/2000	Retta Kelly 2603 Plumcreek Austin TX 78703	25.00	
Principal occupation (Optional)	Employer (Optional)		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 11/33

2 FILER NAME
Ronald D. Earle

3 ACCOUNT # (Ethics Commission filers)
00038197

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
09/18/2000	Virginia Koch Schliz 3616 Claburn Street Austin TX 78759	75.00	
9 Principal occupation (Optional)	10 Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/18/2000	Willie Kocurek 513 W. 41st Street Austin TX 78759	100.00	
Principal occupation (Optional)	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
08/22/2000	Felix Leal 4111 Medical Parkway Austin TX 78756	100.00	
Principal occupation (Optional)	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/11/2000	Paul and Nancy Lewis 2623 Exposition Blvd. Austin TX 78703	200.00	
Principal occupation (Optional)	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
07/25/2000	Jan H. Lindelow 8105 Ravello Ridge Cove Austin TX 78735	3000.00	
Principal occupation (Optional)	Employer (Optional)		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 12/33

2 FILER NAME
Ronald D. Earle

3 ACCOUNT # (Ethics Commission filers)
00038197

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
09/25/2000	Linebarger Heard Goggan Blair Graham Pena & Sampson LLP P. O. Box 17428 Austin TX 78760	500.00	

9 Principal occupation (Optional) | 10 Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/25/2000	Joe Long 919 Congress Avenue Suite 1000 Austin TX 78701	1000.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/21/2000	Mignon McGarry P. O. Box 1501 Austin TX 78767	250.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/25/2000	McGinnis,Lochridge & Kilgore LLP 919 Congress Avenue Austin TX 78701	1000.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/25/2000	Bill Milburn P. O. Box 26507 Austin TX 78755	500.00	

Principal occupation (Optional) | Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 13/33

2 FILER NAME
Ronald D. Earle

3 ACCOUNT # (Ethics Commission files)
00038197

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
09/25/2000	Mark Mueller 404 W. 7th Street Austin TX 78701	5000.00	
9 Principal occupation (Optional)		10 Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/27/2000	Joseph Nabers 111 Congress Avenue Suite 1200 Austin TX 78701	500.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/21/2000	Popp & Ikard,L.L.P. 900 Lavaca Street,Suite 720 Austin TX 78701	500.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/22/2000	Isaac Rabb 11119-B Pinehurst Austin TX 78747	250.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/11/2000	Robin & David Murray Rather 805 Ethel Street Austin TX 78704	2000.00	
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 14/33

2 FILER NAME: Ronald D. Earle

3 ACCOUNT # (Ethics Commission files): 00038197

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
09/28/2000	Ray Wood,Fine & Bonilla,L.L.P P. O. Box 165001 Austin TX 78716	1000.00	

9 Principal occupation (Optional)	10 Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/20/2000	Lester and Janet Reed 3502 Balcones Drive Austin TX 78731	100.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/20/2000	Wayne & Martha Rogers 4104 Deepwoods Dr. Austin TX 78731	100.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/24/2000	Paul Ruiz 222 E. Riverside Dr. Austin TX 78704	100.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/28/2000	Joe James Sawyer 1027 E. Riverside Drive Austin TX 78704	500.00	

Principal occupation (Optional)	Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 15/33

2 FILER NAME
Ronald D. Earle

3 ACCOUNT # (Ethics Commission filers)
00038197

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
09/20/2000	Richard Schott 6 Contributor address; City; State; Zip Code 3513 Lakeland Drive Austin TX 78731	100.00	
9 Principal occupation (Optional)		10 Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/26/2000	Mark Schultz Contributor address; City; State; Zip Code 1700 Rio Grande Austin TX 78701	1000.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/14/2000	Gabrielle Sheshunoff Contributor address; City; State; Zip Code 98 San Jacinto Blvd. #1900 Austin TX 78701	1000.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/06/2000	Lynne Skinner Contributor address; City; State; Zip Code 1702 Pease Road Austin TX 78708	100.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/28/2000	Thad Son Contributor address; City; State; Zip Code 104 Cold Water Lane Austin TX 78734	800.00	
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 16/33

2 FILER NAME
Ronald D. Earle

3 ACCOUNT # (Ethics Commission filers)
00038197

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
09/21/2000	Robb Southerland 6 Contributor address; City; State; Zip Code 3737 Executive Circle Dr. Suite 150 Austin TX 78731	250.00	
9 Principal occupation (Optional)	10 Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/21/2000	Melissa Jones Stevens Contributor address; City; State; Zip Code 2514 Wooldridge Austin TX 78703-2536	1000.00	
Principal occupation (Optional)	Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/26/2000	Texas Automobile Dealers Association P.A.C. Contributor address; City; State; Zip Code 1108 Lavaca Austin TX 78701	1000.00	
Principal occupation (Optional)	Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/25/2000	The Reaud Law Firm Contributor address; City; State; Zip Code 801 Laurel Beaumont TX 77701	1500.00	
Principal occupation (Optional)	Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/18/2000	Michael Toomey Contributor address; City; State; Zip Code 1122 Colorado Street Suite 200 Austin TX 78701	500.00	
Principal occupation (Optional)	Employer (Optional)		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 17/33

2 FILER NAME
Ronald D. Earle

3 ACCOUNT # (Ethics Commission filers)
00038197

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
09/25/2000	Shelburne Veselka 6 Contributor address; City; State; Zip Code 4807 Mount Bonnell Road Austin TX 78731	100.00	
9 Principal occupation (Optional)		10 Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
08/09/2000	Lucille Vivano Contributor address; City; State; Zip Code P. O. Box 509 Smithville TX 78957	100.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
08/22/2000	Tommy Warren Contributor address; City; State; Zip Code P. O. Box 9269 The Woodlands TX 77387	200.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/26/2000	Alide Webb Contributor address; City; State; Zip Code 3622 Doe Trail Austin TX 78746	200.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
07/17/2000	William W. Wells Contributor address; City; State; Zip Code 3267 Bee Caves Road Austin TX 78746	100.00	
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 18/33

2 FILER NAME
Ronald D. Earle

3 ACCOUNT # (Ethics Commission filers)
00038197

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
09/27/2000	Melba Davis Whatley P. O. Box 5623 Austin TX 78763	100.00	
9 Principal occupation (Optional)		10 Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/27/2000	Whitehurst,Harkness,Ozmun & Archuleta P. O. Box 1802 Austin TX 78767	500.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/25/2000	Mary Pearl Williams 3503 Mt. Barker Drive Austin TX 78731	100.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/28/2000	Williams and Forsythe 1100 West Avenue Austin TX 78701	500.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/06/2000	Gwen Youngblood 400 W. 15th Street,Suite 1410 Austin TX 78701	1000.00	
Principal occupation (Optional)		Employer (Optional)	

PLEDGED CONTRIBUTIONS

SCHEDULE B 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 19/33

2 FILER NAME: Ronald D. Earle

3 ACCOUNT # (Ethics Commission filers): 00038197

4 TOTAL OF UNITEMIZED PLEDGES: ⇨⇨⇨⇨⇨⇨ $ 0.00

5 Date	6 Full name of pledgor ☐ out-of-state PAC(ID#_____)	8 Amount of pledge ($)	9 In-kind description (if applicable)
	none		
	7 Pledgor address; City; State; Zip Code TX		

10 Principal occupation (optional)	11 Employer (optional)

LOANS

SCHEDULE E

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 20/33

2 FILER NAME: Ronald D. Earle

3 ACCOUNT # (Ethics Commission filers): 00038197

4 TOTAL OF UNITEMIZED LOANS: ⇨⇨⇨⇨⇨⇨ $ 0.00

5 Date of loan	7 Name of lender ☐ out-of-state PAC(ID#_____)	9 Loan Amount ($)
	none	
6 Is lender a financial Institution?	8 Lender address; City; State; Zip Code	10 Interest rate
N	TX	11 Maturity date

12 Description of Collateral

☒ none

13 GUARANTOR INFORMATION	14 Name of guarantor	16 Amount Guaranteed ($)
☒ not applicable	15 Guarantor address; City; State; Zip Code	

17 Principal Occupation	18 Employer

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 21/33

2 FILER NAME
Ronald D. Earle

3 ACCOUNT # (Ethics Commission filers)
00038197

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
09/07/2000	American Airlines Austin/Bergstrom Airport Austin TX	644.00

8 Purpose of expenditure (See instructions regarding type of information required.)
airfare

9 Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
07/21/2000	American Printing and Mailing 1606 Headway Circle Austin TX 78754	442.74

Purpose of expenditure (See instructions regarding type of information required.)
printing

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
08/30/2000	American Printing and Mailing 1606 Headway Circle Austin TX 78754	1586.98

Purpose of expenditure (See instructions regarding type of information required.)
printing

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
07/12/2000	Book People Bookstore 603 N. Lamar Austin TX 78703	27.01

Purpose of expenditure (See instructions regarding type of information required.)
publications

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 22/33

2 FILER NAME
Ronald D. Earle

3 ACCOUNT # (Ethics Commission filers)
00038197

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
07/12/2000	Book People Bookstore 603 N. Lamar Austin TX 78703	17.32

8 Purpose of expenditure (See instructions regarding type of information required.)
publications

9 Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
07/29/2000	Book People Bookstore 603 N. Lamar Austin TX 78703	29.44

Purpose of expenditure (See instructions regarding type of information required.)
publications

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
07/29/2000	Dell Web Hosting 888-832-7166 TX	17.95

Purpose of expenditure (See instructions regarding type of information required.)
advertising

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
09/07/2000	Dell Web Hosting 888-832-7166 TX	38.86

Purpose of expenditure (See instructions regarding type of information required.)
advertising

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 23/33

2 FILER NAME
Ronald D. Earle

3 ACCOUNT # (Ethics Commission filers)
00038197

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
09/28/2000	Dell Web Hosting 888-832-7166 TX	19.43

8 Purpose of expenditure (See instructions regarding type of information required.)
advertising

9 Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
07/21/2000	Draper Screen Designs 2202 Southern Oaks Austin TX 78745	768.90

Purpose of expenditure (See instructions regarding type of information required.)
advertising

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
07/21/2000	Jodie Eldridge 603 W. 13th Street #432 Austin TX 78701	5000.00

Purpose of expenditure (See instructions regarding type of information required.)
consulting fees

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
08/10/2000	Jodie Eldridge 603 W. 13th Street #432 Austin TX 78701	5000.00

Purpose of expenditure (See instructions regarding type of information required.)
consulting fees

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 24/33

2 FILER NAME
Ronald D. Earle

3 ACCOUNT # (Ethics Commission filers)
00038197

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
09/07/2000	Jodie Eldridge 603 W. 13th Street #432 Austin TX 78701	5000.00

8 Purpose of expenditure (See instructions regarding type of information required.)
consulting fees

9 Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
09/20/2000	Jodie Eldridge 603 W. 13th Street #432 Austin TX 78701	1702.43

Purpose of expenditure (See instructions regarding type of information required.)
reimburse parking,meals,office supplies and advertisi - ng

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
08/30/2000	Rodrigo Fernandez 1713 Bluebonnet Austin TX 78704	4000.00

Purpose of expenditure (See instructions regarding type of information required.)
advertising

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
07/02/2000	Richard Grant Jr. 4131 Spicewood Springs Road #D-1 Austin TX 78759	100.00

Purpose of expenditure (See instructions regarding type of information required.)
consulting fees

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 25/33

2 FILER NAME
Ronald D. Earle

3 ACCOUNT # (Ethics Commission files)
00038197

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
08/31/2000	Jared's Foundation 12719 W. Hwy 71 Austin TX 78736	100.00

8 Purpose of expenditure (See instructions regarding type of information required.)
donation

9 Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
09/21/2000	KAMX-FM 4301 Westbank Drive Austin TX 78746	250.00

Purpose of expenditure (See instructions regarding type of information required.)
advertising

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
07/21/2000	Message Audience & Presentation 2400 S. 4th Street Austin TX 78704	1500.00

Purpose of expenditure (See instructions regarding type of information required.)
advertising

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
08/10/2000	Message Audience & Presentation 2400 S. 4th Street Austin TX 78704	1500.00

Purpose of expenditure (See instructions regarding type of information required.)
advertising

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 26/33

2 FILER NAME
Ronald D. Earle

3 ACCOUNT # (Ethics Commission files)
00038197

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
08/30/2000	Nokoa 1223 Rosewood Avenue Austin TX 78702	250.00

8 Purpose of expenditure (See instructions regarding type of information required.)	9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name / Office sought / Office held
advertising	

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
08/10/2000	Settlement Home for Children 1600 Peyton Gin Road Austin TX 78758	100.00

Purpose of expenditure (See instructions regarding type of information required.)	Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name / Office sought / Office held
donation	

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
07/21/2000	Southwestern Bell Telephone P. O. Box 4844 Houston TX 77097	109.01

Purpose of expenditure (See instructions regarding type of information required.)	Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name / Office sought / Office held
telephone	

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
08/30/2000	Southwestern Bell Telephone P. O. Box 4844 Houston TX 77097	47.70

Purpose of expenditure (See instructions regarding type of information required.)	Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name / Office sought / Office held
telephone	

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 27/33

2 FILER NAME
Ronald D. Earle

3 ACCOUNT # (Ethics Commission filers)
00038197

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
09/17/2000	Southwestern Bell Telephone P. O. Box 4844 Houston TX 77097	47.70

8 Purpose of expenditure (See instructions regarding type of information required.)
telephone

9 Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
07/21/2000	Stuffer's Mailhouse 5312 Cameron Road Austin TX 78723	717.74

Purpose of expenditure (See instructions regarding type of information required.)
mailing costsand postage

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
09/19/2000	Travis County P. O. Box 1748 Austin TX 78767	60.00

Purpose of expenditure (See instructions regarding type of information required.)
office coffee

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
08/30/2000	Travis County Democratic Party P. O. Box 684263 Austin TX 78768-4263	5000.00

Purpose of expenditure (See instructions regarding type of information required.)
contribution

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 28/33

2 FILER NAME
Ronald D. Earle

3 ACCOUNT # (Ethics Commission filers)
00038197

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
07/10/2000	Wells Fargo Bank 1200 Montego Way Walnut Creek CA 94598	26.67

8 Purpose of expenditure (See instructions regarding type of information required.)
bank charges

9 Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
07/13/2000	Wells Fargo Bank 1200 Montego Way Walnut Creek CA 94598	150.00

Purpose of expenditure (See instructions regarding type of information required.)
bank charges

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
08/03/2000	Wells Fargo Bank 1200 Montego Way Walnut Creek CA 94598	25.00

Purpose of expenditure (See instructions regarding type of information required.)
bank charges

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
08/10/2000	Wells Fargo Bank 1200 Montego Way Walnut Creek CA 94598	30.00

Purpose of expenditure (See instructions regarding type of information required.)
bank charges

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 (512)463-5800 1-800-325-8506

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 29/33

2 FILER NAME
Ronald D. Earle

3 ACCOUNT # (Ethics Commission filers)
00038197

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
09/07/2000	Wells Fargo Bank 1200 Montego Way Walnut Creek CA 94598	25.00

8 Purpose of expenditure (See instructions regarding type of information required.)
bank charges

9 Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
09/13/2000	Wells Fargo Bank 1200 Montego Way Walnut Creek CA 94598	5.00

Purpose of expenditure (See instructions regarding type of information required.)
bank charges

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
09/13/2000	Wells Fargo Bank 1200 Montego Way Walnut Creek CA 94598	25.00

Purpose of expenditure (See instructions regarding type of information required.)
bank charges

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 30/33

2 FILER NAME
Ronald D. Earle

3 ACCOUNT # (Ethics Commission files) 00038197

4 Date	5 Payee name	8 Amount ($)
09/28/2000	Ronald D. Earle	90.68
	6 Payee address; City; State; Zip Code P. O. Box 2092 Austin TX 78768	
	7 Purpose of expenditure (See instructions regarding type of information required.) automobile mileage	[X] Reimbursement from political contributions intended

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 (512)463-5800 1-800-325-8506

PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

SCHEDULE H

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 31/33

2 FILER NAME
Ronald D. Earle

3 ACCOUNT # (Ethics Commission filers)
00038197

4 Date	5 Business name	7 Amount ($)
	none	
	6 Business address; City; State; Zip Code TX	

8 Purpose of payment (See instructions regarding type of information required.)

9 ** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 (512)463-5800 1-800-325-8506

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The INSTRUCTION GUIDE explains how to complete this form.	1 Total pages report: 32/33
2 FILER NAME Ronald D. Earle	3 ACCOUNT # (Ethics Commission filers) 00038197

4 Date	5 Payee name	8 Amount ($)
	none	
	6 Payee address; City; State; Zip Code TX	
	7 Purpose of expenditure (See instructions regarding type of information required.)	

CREDITS (optional)

SCHEDULE K

The INSTRUCTION GUIDE explains how to complete this form.	1 Total pages report: 33/33
2 FILER NAME Ronald D. Earle	3 ACCOUNT # (Ethics Commission filers) 00038197

4 Date	5 Payor name	6 Amount ($)
	none	
	6 Payor address; City; State; Zip Code TX	
	7 Reason for credit	