



# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME  
RON DAVIS

15 ACCOUNT # (Ethics Commission files)  
0000000

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

Ron Davis Campaign

GENERAL

COMMITTEE ADDRESS  
P.O. Box 16665

SPECIFIC

Austin TX 78761

COMMITTEE CAMPAIGN TREASURER NAME

Louis Simms

additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS  
7501 Barcelona Drive

Austin TX 78752-2006

17 NO REPORTABLE ACTIVITY

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

18 CONTRIBUTION TOTALS

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

\$ 0.00

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

\$ 12110.00

EXPENDITURE TOTALS

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

\$ 0.00

4. TOTAL POLITICAL EXPENDITURES

\$ 11894.07

OUTSTANDING LOAN TOTALS

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

\$ 0.00

19 AFFIDAVIT



FELICITAS B. CHAVEZ  
Notary Public, State of Texas  
My Commission Expires  
DEC. 5, 2002

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 the 15-Election Code.

Affix Notary Stamp/Seal Above

Sworn to and subscribed before me, by the said Ron Davis, this the 16th day of July, 2001, to certify which, witness my hand and seal of office.

*Ron Davis*  
Signature of Candidate or Officeholder

*Felicitas B. Chavez*  
Signature of officer administering oath

Felicitas B. Chavez  
Print Name administering oath

Notary Public  
Title of Officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

**SCHEDULE A 1**  
(FOR FORMS C/DH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 3/20	
2 FILER NAME RON DAVIS		3 ACCOUNT # (Ethics Commission files) 00000000	
4 Date 03/29/2001	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Ambrust Brown & Davis, L.L.P. ..... 6 Contributor address; City; State; Zip Code 100 Congress Avenue, Suite 1300 Austin TX 78701-4042	7 Amount of contribution (\$) 250.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 04/04/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Mrs. William D. Arnold ..... Contributor address; City; State; Zip Code 3404 Southhill Circle Austin TX 78703	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 04/14/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Austin Board of Realtors PAC N ..... Contributor address; City; State; Zip Code 4106 Medical Parkway Austin TX 78756-3700	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 03/31/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) BM & OH-ELECTO-PAC ..... Contributor address; City; State; Zip Code 1400 Franklin Plaza 111 Congress Ave Austin TX 78701	Amount of contribution (\$) 1000.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 04/06/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Timy Baranoff ..... Contributor address; City; State; Zip Code 2307 Tower Dr. Austin TX 78703	Amount of contribution (\$) 25.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

**SCHEDULE A 1**  
(FOR FORMS COH & SPAC)

The **INSTRUCTION GUIDE** explains how to complete this form.

**1** Total pages this report:  
4/20

**2** FILER NAME  
RON DAVIS

**3** ACCOUNT # (Ethics Commission files)  
00000000

**4** Date: 04/04/2001  
**5** Full name of contributor  out-of-state PAC(ID# \_\_\_\_\_):  
Mary Clare Barry  
**6** Contributor address; City; State; Zip Code:  
1505 Brentwood  
Austin TX 78757-2509

**7** Amount of contribution (\$):  
10.00

**8** In-kind contribution description (if applicable)

**9** Principal occupation (Optional)

**10** Employer (Optional)

Date: 05/22/2001  
Full name of contributor  out-of-state PAC(ID# \_\_\_\_\_):  
Gail Beall  
Contributor address; City; State; Zip Code:  
2001 Justin Lane  
Austin TX 78757-2412

Amount of contribution (\$):  
50.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date: 05/03/2001  
Full name of contributor  out-of-state PAC(ID# \_\_\_\_\_):  
Larry Beard  
Contributor address; City; State; Zip Code:  
6200 Gilbert Rd.  
Austin TX 78724

Amount of contribution (\$):  
200.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date: 04/04/2001  
Full name of contributor  out-of-state PAC(ID# \_\_\_\_\_):  
Bert Pence  
Contributor address; City; State; Zip Code:  
708 Rio Grande  
Austin TX 78701-2720

Amount of contribution (\$):  
25.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date: 04/04/2001  
Full name of contributor  out-of-state PAC(ID# \_\_\_\_\_):  
Phyllis Brinkley  
Contributor address; City; State; Zip Code:  
6106 Rickay Dr.  
Austin TX 78757

Amount of contribution (\$):  
10.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A 1 (FOR FORMS C/DH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

**1** Total pages this report:  
5/20

**2** FILER NAME  
RON DAVIS

**3** ACCOUNT # (Ethics Commission Item)  
00000000

**4** Date: 04/03/2001  
**5** Full name of contributor  out-of-state PAC(ID# \_\_\_\_\_):  
Barara Burton  
**6** Contributor address; City; State; Zip Code:  
1833 Coronado Hills Dr.  
Austin TX 78752

**7** Amount of contribution (\$):  
125.00

**8** In-kind contribution description (if applicable)

**9** Principal occupation (Optional)

**10** Employer (Optional)

Date: 04/06/2001  
Full name of contributor  out-of-state PAC(ID# \_\_\_\_\_):  
Dorothy M. Burton  
Contributor address; City; State; Zip Code:  
4601 Munson  
Austin TX 78721

Amount of contribution (\$):  
25.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date: 03/31/2001  
Full name of contributor  out-of-state PAC(ID# \_\_\_\_\_):  
Roy Butler  
Contributor address; City; State; Zip Code:  
Two Niles Rd  
Austin TX 78703

Amount of contribution (\$):  
125.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date: 04/04/2001  
Full name of contributor  out-of-state PAC(ID# \_\_\_\_\_):  
Felicitas B. Chavez  
Contributor address; City; State; Zip Code:  
5100 Galen Court  
Austin TX 78744

Amount of contribution (\$):  
25.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date: 04/03/2001  
Full name of contributor  out-of-state PAC(ID# \_\_\_\_\_):  
Chuck Croslin  
Contributor address; City; State; Zip Code:  
6309 Northgrove Road  
Austin TX 78731

Amount of contribution (\$):  
125.00

In-kind contribution description (if applicable)

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: 6/20	
2 FILER NAME RON DAVIS		3 ACCOUNT # (Ethics Commission Form) 00000000	
4 Date 05/06/2001	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) James Dannenbaum  6 Contributor address; City; State; Zip Code 3100 W. Alabama Houston TX 77098	7 Amount of contribution (\$) 1000.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 04/04/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Forrest C. Davis  Contributor address; City; State; Zip Code 3605 Leachville Dr. Austin TX 78749	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 04/18/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Robert Dove  Contributor address; City; State; Zip Code 5402 Fairmont Circle Austin TX 78745	Amount of contribution (\$) 25.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 04/04/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Bruce Elfant  Contributor address; City; State; Zip Code 1205 Fairwood Austin TX 78722	Amount of contribution (\$) 25.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 04/04/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Royce Faulkner  Contributor address; City; State; Zip Code P.O. Box 722 Austin TX 78767-0722	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
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:  
7/20

**2** FILER NAME  
RON DAVIS

**3** ACCOUNT # (Ethics Commission files)  
00000000

**4** Date: 04/03/2001  
**5** Full name of contributor  out-of-state PAC(ID# \_\_\_\_\_):  
Charlotte Flynn  
**6** Contributor address; City; State; Zip Code:  
7710 W. Rinn Dr.  
Austin TX 78731

**7** Amount of contribution (\$):  
25.00

**8** In-kind contribution description (if applicable):

**9** Principal occupation (Optional):

**10** Employer (Optional):

Date: 04/06/2001  
Full name of contributor  out-of-state PAC(ID# \_\_\_\_\_):  
Fort Branch Landing LP  
Contributor address; City; State; Zip Code:  
1200-1 12th Ave.  
N.E., Suite C-145  
Bellevue WA 98004

Amount of contribution (\$):  
500.00

In-kind contribution description (if applicable):

Principal occupation (Optional):

Employer (Optional):

Date: 04/04/2001  
Full name of contributor  out-of-state PAC(ID# \_\_\_\_\_):  
Fulbright & Jaworski L.L.P. Texas Committee  
Contributor address; City; State; Zip Code:  
1301 McKinney Suite 5100  
Houston TX 77010

Amount of contribution (\$):  
500.00

In-kind contribution description (if applicable):

Principal occupation (Optional):

Employer (Optional):

Date: 04/04/2001  
Full name of contributor  out-of-state PAC(ID# \_\_\_\_\_):  
Henry Gilmore  
Contributor address; City; State; Zip Code:  
11105 S. Bay Ln.  
Austin TX 78739

Amount of contribution (\$):  
125.00

In-kind contribution description (if applicable):

Principal occupation (Optional):

Employer (Optional):

Date: 04/10/2001  
Full name of contributor  out-of-state PAC(ID# \_\_\_\_\_):  
Girling Political Action Committee  
Contributor address; City; State; Zip Code:  
P.O. Box 4294  
Austin TX 78765

Amount of contribution (\$):  
250.00

In-kind contribution description (if applicable):

Principal occupation (Optional):

Employer (Optional):

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

**SCHEDULE A 1**  
(FOR FORMS COH & SPAC)

The **INSTRUCTION GUIDE** explains how to complete this form.

**1** Total pages this report:  
8/20

**2** FILER NAME  
RON DAVIS

**3** ACCOUNT # (Ethics Commission files)  
00000000

**4** Date  
03/29/2001

**5** Full name of contributor  out-of-state PAC(ID# \_\_\_\_\_)  
Graves, Dougherty, Hearon & Moody

**7** Amount of contribution (\$)  
250.00

**8** In-kind contribution description (if applicable)

**6** Contributor address; City; State; Zip Code  
P.O. Box 98  
Austin TX 78767

**9** Principal occupation (Optional)

**10** Employer (Optional)

Date

Full name of contributor  out-of-state PAC(ID# \_\_\_\_\_)  
Kay E. Gregory

Amount of contribution (\$)

In-kind contribution description (if applicable)

04/04/2001

Contributor address; City; State; Zip Code  
2939 Westlake Cove  
Austin TX 78746

1000.00

Principal occupation (Optional)

Employer (Optional)

Date

Full name of contributor  out-of-state PAC(ID# \_\_\_\_\_)  
Balie Griffith

Amount of contribution (\$)

In-kind contribution description (if applicable)

04/14/2001

Contributor address; City; State; Zip Code  
3711 Taylors Drive  
Austin TX 78703

125.00

Principal occupation (Optional)

Employer (Optional)

Date

Full name of contributor  out-of-state PAC(ID# \_\_\_\_\_)  
Kathleen Hockett

Amount of contribution (\$)

In-kind contribution description (if applicable)

04/10/2001

Contributor address; City; State; Zip Code  
7004 Fred Morse Dr  
Austin TX 78723

10.00

Principal occupation (Optional)

Employer (Optional)

Date

Full name of contributor  out-of-state PAC(ID# \_\_\_\_\_)  
Don Herley

Amount of contribution (\$)

In-kind contribution description (if applicable)

03/31/2001

Contributor address; City; State; Zip Code  
10100 Santa Monica Blvd., Suite 1300  
Los Angeles CA 90067

125.00

Principal occupation (Optional)

Employer (Optional)



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

**SCHEDULE A 1**  
(FOR FORMS COH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 9/20	
2 FILER NAME RON DAVIS		3 ACCOUNT # (Ethics Commission files) 00000000	
4 Date 04/03/2001	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Gustavia Houston	7 Amount of contribution (\$) 20.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 1313 Cotton St. Austin TX 78702			
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 03/29/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) James Jack	Amount of contribution (\$) 25.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2008 Rabb Glen No. B Austin TX 78704			
Principal occupation (Optional)		Employer (Optional)	
Date 04/03/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Martha James	Amount of contribution (\$) 25.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4100 Jackson Avenue Austin TX 78731-8006			
Principal occupation (Optional)		Employer (Optional)	
Date 04/24/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Ron Kampa	Amount of contribution (\$) 10.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3902 Glengarry Dr. Austin TX 78731-3812			
Principal occupation (Optional)		Employer (Optional)	
Date 04/04/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Beverly Kimbrough	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 5903 Lakeside Trail Austin TX 78734			
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: 10/20	
2 FILER NAME RON DAVIS		3 ACCOUNT # (Ethics Commission Menu) 00000000	
4 Date 04/14/2001	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) L.S. Johnston Architects	7 Amount of contribution (\$) 40.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 1313 E. 6th St. Austin TX 78702			
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 03/29/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Jane Laessle	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3210 Oakmont Blvd Austin TX 78703			
Principal occupation (Optional)		Employer (Optional)	
Date 04/03/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Linebarger Heard Goggan Blair Graham Pena & Sampson,LLP	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P.P. Box 17428 Austin TX 78760			
Principal occupation (Optional)		Employer (Optional)	
Date 03/29/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Randy Mann	Amount of contribution (\$) 25.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 6708 Capriola Dr. Austin TX 78745			
Principal occupation (Optional)		Employer (Optional)	
Date 04/04/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Anne C. McAfee	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4831 Timberline Drive Austin TX 78746-5830			
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: 11/20	
2 FILER NAME RON DAVIS		3 ACCOUNT # (Ethics Commission Form) 00000000	
4 Date 04/16/2001	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Gordon McKinley Jr.	7 Amount of contribution (\$) 500.00	8 In-kind contribution description (if applicable)
	6 Contributor address; City; State; Zip Code 8440 Burnet Road Suite 148 Austin TX 78757		
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 04/16/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) R.E. Merritt	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 1100 Silver Hill Dr. Austin TX 78746		
Principal occupation (Optional)		Employer (Optional)	
Date 04/04/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Mildred Moseley	Amount of contribution (\$) 25.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 7203 Crystalbrook Dr. Austin TX 78724-3310		
Principal occupation (Optional)		Employer (Optional)	
Date 04/04/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Patricia Ann Murfin	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 13903 Murfin Rd. Austin TX 78734-5803		
Principal occupation (Optional)		Employer (Optional)	
Date 04/03/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) James Nias	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 1116 Reagan Terrace Austin TX 78704		
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:  
12/20

**2** FILER NAME  
RON DAVIS

**3** ACCOUNT # (Ethics Commission Name)  
00000000

**4** Date  
04/03/2001

**5** Full name of contributor  out-of-state PAC(ID# \_\_\_\_\_)  
Volma Overton

**6** Contributor address; City; State; Zip Code  
1403 Springdale Road  
Austin TX 78721

**7** Amount of contribution (\$)  
25.00

**8** In-kind contribution description (if applicable)

**9** Principal occupation (Optional)

**10** Employer (Optional)

Date  
04/04/2001

Full name of contributor  out-of-state PAC(ID# \_\_\_\_\_)  
Lex D. Owens

Contributor address; City; State; Zip Code  
P.O. Box 4051  
Austin TX 78765-4051

Amount of contribution (\$)  
150.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date  
04/06/2001

Full name of contributor  out-of-state PAC(ID# \_\_\_\_\_)  
Paleface Ranch

Contributor address; City; State; Zip Code  
RT. 2 Box 19  
Spicewood TX 78669

Amount of contribution (\$)  
250.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date  
04/04/2001

Full name of contributor  out-of-state PAC(ID# \_\_\_\_\_)  
Joe Pinnelli

Contributor address; City; State; Zip Code  
P.O. Box 50038  
Austin TX 78763

Amount of contribution (\$)  
50.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date  
04/04/2001

Full name of contributor  out-of-state PAC(ID# \_\_\_\_\_)  
Rafael Quintanilla

Contributor address; City; State; Zip Code  
2804 Rock Terrace Dr.  
Austin TX 78704

Amount of contribution (\$)  
125.00

In-kind contribution description (if applicable)

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: 13/20	
2 FILER NAME RON DAVIS		3 ACCOUNT # (Ethics Commission Ben) 00000000	
4 Date 04/14/2001	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Anne D. Robinson	7 Amount of contribution (\$) 10.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 2309 Shoat Creek Blvd. Austin TX 78705			
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 04/04/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Craig Smith	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1908 Barton Pky Austin TX 78704-3212			
Principal occupation (Optional)		Employer (Optional)	
Date 04/04/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) David N. Smith	Amount of contribution (\$) 25.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P.O. Box 537 Austin TX 78767-0537			
Principal occupation (Optional)		Employer (Optional)	
Date 03/29/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Irwin Spear	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2815 Peecos Austin TX 78703			
Principal occupation (Optional)		Employer (Optional)	
Date 04/06/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Mark Stine	Amount of contribution (\$) 25.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1403 W. 10th St. Austin TX 78703			
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: 14/20	
2 FILER NAME RON DAVIS		3 ACCOUNT # (Ethics Commission Req.) 00000000	
4 Date 04/14/2001	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Turner, Collie & Braden PAC	7 Amount of contribution (\$) 250.00	8 In-kind contribution description (if applicable)
	6 Contributor address; City; State; Zip Code P.O. Box 130089 Houston TX 77219		
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 04/16/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Cal E. Varner	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 1211 East 11th Street Austin TX 78702		
Principal occupation (Optional)		Employer (Optional)	
Date 03/29/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Ben F. Vaughan III	Amount of contribution (\$) 125.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code P.O. Box 2233 Austin TX 78768-2233		
Principal occupation (Optional)		Employer (Optional)	
Date 04/14/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Vinson & Elkins Texas PAC	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 2300 First City Tower Houston TX 77002-6760		
Principal occupation (Optional)		Employer (Optional)	
Date 04/18/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) W.M. Walsh	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 3701 Duval St. Austin TX 78705		
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:  
15/20

**2** FILER NAME  
RON DAVIS

**3** ACCOUNT # (Ethics Commission files)  
00000000

**4** Date: 04/16/2001  
**5** Full name of contributor  out-of-state PAC(ID# \_\_\_\_\_)  
Joe C. Whittemore  
**6** Contributor address; City; State; Zip Code  
12504 Brandywine Court  
Austin TX 78727

**7** Amount of contribution (\$)  
500.00

**8** In-kind contribution description (if applicable)

**9** Principal occupation (Optional)

**10** Employer (Optional)

Date: 06/22/2001  
Full name of contributor  out-of-state PAC(ID# \_\_\_\_\_)  
Winstead Sechrest & Minick P.C. PAC  
Contributor address; City; State; Zip Code  
5400 Renaissance Tower  
1201 Elm St.  
Dallas TX 75270

Amount of contribution (\$)  
250.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

# POLITICAL EXPENDITURES

## SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:  
16/20

2 FILER NAME  
RON DAVIS

3 ACCOUNT # (Ethics Commission Item)  
00000000

4 Date  
04/10/2001

5 Payee name  
Alfred Stanley and Associates

7 Amount  
(\$)  
3600.00

6 Payee address; City; State; Zip Code  
1409 Hardouin Avenue  
Austin TX 78703

8 Purpose of expenditure (See instructions regarding type of information required.)  
Contract campaign funds work.

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

Date  
04/17/2001

Payee name  
Alfred Stanley and Associates

Amount  
(\$)  
1000.00

Payee address; City; State; Zip Code  
1409 Hardouin Avenue  
Austin TX 78703

Purpose of expenditure (See instructions regarding type of information required.)  
Contract campaign funds work

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

Date  
05/07/2001

Payee name  
Alfred Stanley and Associates

Amount  
(\$)  
1335.00

Payee address; City; State; Zip Code  
1409 Hardouin Avenue  
Austin TX 78703-2516

Purpose of expenditure (See instructions regarding type of information required.)  
Contract campaign funds work

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

Date  
04/10/2001

Payee name  
David Butts

Amount  
(\$)  
1500.00

Payee address; City; State; Zip Code  
1914 Patton Lane  
Austin TX 78723

Purpose of expenditure (See instructions regarding type of information required.)  
Contract campaign work

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:  
17/202 FILER NAME  
RON DAVIS3 ACCOUNT # (Ethics Commission Item)  
000000004 Date  
04/17/20015 Payee name  
David Butts7 Amount  
(\$)  
1500.006 Payee address; City; State; Zip Code  
1914 Patton Lane  
Austin TX 787238 Purpose of expenditure (See instructions regarding type of  
information required.)  
Contract consultant work9 Complete if direct expenditure to benefit C/OH \*\*  
Candidate / Officeholder name Office sought Office heldDate  
01/03/2001Payee name  
Laboratory ComputersAmount  
(\$)  
135.31Payee address; City; State; Zip Code  
5400 North Lamar #202  
Austin TX 78751Purpose of expenditure (See instructions regarding type of  
information required.)  
Upgrade computer for new Texas Ethics Commission  
Disclosure Filing System CDComplete if direct expenditure to benefit C/OH \*\*  
Candidate / Officeholder name Office sought Office heldDate  
04/18/2001Payee name  
Ron Davis CampaignAmount  
(\$)  
50.00Payee address; City; State; Zip Code  
P.O. Box 16665  
Austin TX 78761Purpose of expenditure (See instructions regarding type of  
information required.)  
Petty cashComplete if direct expenditure to benefit C/OH \*\*  
Candidate / Officeholder name Office sought Office heldDate  
04/19/2001Payee name  
SmartmailAmount  
(\$)  
228.49Payee address; City; State; Zip Code  
2011 Anchor Lane  
Austin TX 78723-5712Purpose of expenditure (See instructions regarding type of  
information required.)  
Convert data/produce IJ file. 754 hand insert and add -  
ress, prepare and seal.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:  
18/202 FILER NAME  
RON DAVIS3 ACCOUNT # (Ethics Commission Item)  
000000004 Date  
03/01/20015 Payee name  
Texas Center for Documentary Photography7 Amount  
(\$)  
324.756 Payee address; City; State; Zip Code  
2104 East Martin Luther King Blvd  
Austin TX 787028 Purpose of expenditure (See instructions regarding type of  
information required.)  
Tank Farm and Election photos9 Complete if direct expenditure to benefit C/OH \*\*  
Candidate / Officeholder name Office sought Office heldDate  
04/02/2001Payee name  
US Postal ServiceAmount  
(\$)  
13.80Payee address; City; State; Zip Code  
8225 Cross Park Dr.  
Austin TX 78754Purpose of expenditure (See instructions regarding type of  
information required.)  
Priority mail serviceComplete if direct expenditure to benefit C/OH \*\*  
Candidate / Officeholder name Office sought Office heldDate  
04/02/2001Payee name  
US Postal ServiceAmount  
(\$)  
36.97Payee address; City; State; Zip Code  
8225 Cross Park Dr.  
Austin TX 78754Purpose of expenditure (See instructions regarding type of  
information required.)  
StampsComplete if direct expenditure to benefit C/OH \*\*  
Candidate / Officeholder name Office sought Office heldDate  
04/10/2001Payee name  
US Postal ServiceAmount  
(\$)  
12.35Payee address; City; State; Zip Code  
8225 Cross Park Dr.  
Austin TX 78754Purpose of expenditure (See instructions regarding type of  
information required.)  
Priority mail serviceComplete 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:  
19/202 FILER NAME  
RON DAVIS3 ACCOUNT # (Ethics Commission Item)  
000000004 Date  
05/01/20015 Payee name  
US Postal Service7 Amount  
(\$)  
3.506 Payee address; City; State; Zip Code  
8225 Cross Park Dr.  
Austin TX 787548 Purpose of expenditure (See instructions regarding type of  
information required.)  
Priority mail services9 Complete if direct expenditure to benefit C/OH \*\*  
Candidate / Officeholder name Office sought Office heldDate  
05/01/2001Payee name  
US Postal ServiceAmount  
(\$)  
4.80Payee address; City; State; Zip Code  
8225 Cross Park Dr.  
Austin TX 78754Purpose of expenditure (See instructions regarding type of  
information required.)  
Priority mail servicesComplete if direct expenditure to benefit C/OH \*\*  
Candidate / Officeholder name Office sought Office heldDate  
05/11/2001Payee name  
US Postal ServiceAmount  
(\$)  
38.00Payee address; City; State; Zip Code  
8225 Cross Park Dr.  
Austin TX 78754Purpose of expenditure (See instructions regarding type of  
information required.)  
StampsComplete if direct expenditure to benefit C/OH \*\*  
Candidate / Officeholder name Office sought Office heldDate  
04/04/2001Payee name  
Worley PrintingAmount  
(\$)  
2111.10Payee address; City; State; Zip Code  
3217 North IH 35  
Austin TX 78722Purpose of expenditure (See instructions regarding type of  
information required.)  
Printing servicesComplete if direct expenditure to benefit C/OH \*\*  
Candidate / Officeholder name Office sought Office held

# TEXT ANNOTATION

Information entered by filer as a memo

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Schedule COH Travis County Commissioner Pct 1