

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

5191

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:

14 pages

3 CANDIDATE /
OFFICEHOLDER
NAME

TITLE FIRST MI
Judge Samuel T
NICKNAME LAST SUFFIX
Biscoe

OFFICE USE ONLY

Date Received

4 CANDIDATE /
OFFICEHOLDER
ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

6411 Bridgewater Dr.
Austin, Texas 78723

Change of Address

02 JUL 15 PM 17
TRAVIS COUNTY ETHICS COMMISSION

Receipt #

HD / PM AM Amount

Date Processed 17

Date Imaged

5 CAMPAIGN
TREASURER
NAME

TITLE FIRST MI
Eugene
NICKNAME LAST SUFFIX
Bailey

6 CAMPAIGN
TREASURER
ADDRESS
(Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

3212 Northeast Dr. Austin, Texas
78723

7 CAMPAIGN
TREASURER
PHONE

AREA CODE PHONE NUMBER EXTENSION

(512) 926-0427

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 Month Day Year

3 / 5 / 02 THROUGH 7 / 15 / 02

10 ELECTION

ELECTION DATE

Month Day Year

11 / 5 / 02

ELECTION TYPE

- Primary Runoff General Special

11 OFFICE

OFFICE HELD (# any)

Travis County Judge

12 OFFICE SOUGHT (if known)

Travis County Judge

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

NONE

Address / PO Box; Apt. / Suite #; City; State; Zip Code

additional pages

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

2/14

14 C/OH NAME <i>Samuel T. Biscoe</i>	15 ACCOUNT # (Ethics Commission filers)
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16 SUPPORTING POLITICAL COMMITTEE(S) <input type="checkbox"/> additional pages	** 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. **	
	<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME <i>N/A</i>
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

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

18 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ —
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 3675.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ —
	4. TOTAL POLITICAL EXPENDITURES	\$ 12,905.42
OUTSTANDING LOAN TOTALS	5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ —

19 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Samuel T. Biscoe
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Samuel T. Biscoe this the 15th day of July 2002, to certify which, witness my hand and seal of office.

Josie Z. Zavala
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

3/14

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

2 pages

2 FILER NAME

Samuel T. Biscoe

3 ACCOUNT # (Ethics Commission filers)

4 Date

3/7/02

5 Full name of contributor

Eric Pomo

out of state PAC

7 Amount of contribution (\$)

1,500.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

609 E. 7th St.
Austin, TX. 78701

9 Principal occupation

10 Employer (optional)

Date

3/7/02

Full name of contributor

Robert & Gertrude Wormley

out of state PAC

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

P.O. Box 6426
Austin, TX 78768-2199

Principal occupation

Employer (optional)

Date

3/8/02

Full name of contributor

C. Kent Olson

out of state PAC

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

4318 Ridge Pole Ln.
Spicewood, TX 78668

Principal occupation

Employer (optional)

Date

3/8/02

Full name of contributor

Joseph Lynn Nabors

out of state PAC

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

6034 W. Conyard Dr.
Suite 100B
Austin, TX 78730-5090

Principal occupation

Employer (optional)

Date

3/11/02

Full name of contributor

Arlene Tillman

out of state PAC

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

10506 Erica Leigh Court
Austin, TX 78724

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

4/14

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME <i>Samuel T. Biscoe</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>3/15/02</i>	5 Full name of contributor <i>Lineberger, Gossan, Blair & Penn</i> <input type="checkbox"/> out of state PAC	7 Amount of contribution (\$) <i>5,100.⁰⁰</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>1949 South I. H. 35 P.O. Box 17428 Austin, TX 78748</i>			
9 Principal occupation <i>ATTORNEYS</i>		10 Employer (optional)	
Date <i>4/4/02</i>	Full name of contributor <i>RECA - Good Government PAC</i> <input type="checkbox"/> out of state PAC	Amount of contribution (\$) <i>5,100.⁰⁰</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>98 San Jacinto Suite 180 Austin, TX 78701</i>			
Principal occupation		Employer (optional)	
Date	Full name of contributor <input type="checkbox"/> out of state PAC	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code			
Principal occupation		Employer (optional)	
Date	Full name of contributor <input type="checkbox"/> out of state PAC	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code			
Principal occupation		Employer (optional)	
Date	Full name of contributor <input type="checkbox"/> out of state PAC	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code			
Principal occupation		Employer (optional)	

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

POLITICAL EXPENDITURES

SCHEDULE F

5/14

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

10 pages

2 FILER NAME

Samuel T. Biscoe

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Payee name

7

Amount (\$)

3/5/02

U.S. Postmaster

6 Payee address; City; State; Zip Code

600 Guadalupe
Austin, TX 78701

\$2104.56

8 Purpose of expenditure

Postage

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

Office sought / held

Date

Payee name

Amount (\$)

3/5/02

Smart Mail

Payee address; City; State; Zip Code

2011 Anchor Ln.
Austin, TX 78723-7234

\$895.35

Purpose of expenditure

Mail Services

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

Office sought / held

Date

Payee name

Amount (\$)

3/5/02

Travis County Clerk

Payee address; City; State; Zip Code

P.O. Box 1748
Austin, TX 78767

\$35.00

Purpose of expenditure

Election Returns
3/12/12 Primary

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

Office sought / held

Date

Payee name

Amount (\$)

3/5/02

Crockett Center

Payee address; City; State; Zip Code

6301 Hwy 290 E.
Austin, TX 78723

\$8.00

Purpose of expenditure

Table & 2 Chairs
(Primary Site) Election Nite

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

Office sought / held

POLITICAL EXPENDITURES

SCHEDULE F

6/14

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F:
2 FILER NAME <i>Samuel T. Biscoe</i>		3 ACCOUNT # (Ethics Commission filers)
4 Date <i>3/8/02</i>	5 Payee name <i>Jammin 105.9 Radio</i>	7 Amount (\$) <i>1,640.00</i>
6 Payee address; City; State; Zip Code <i>705 Lamar Austin, TX 78701</i>		
8 Purpose of expenditure <i>Radio Advertising</i>		9 .. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought / held
Date <i>3/8/02</i>	Payee name <i>KAZI - Radio</i>	Amount (\$) <i>1,500.00</i>
Payee address; City; State; Zip Code <i>8906 Wall St. Austin, TX 78723</i>		
Purpose of expenditure <i>Radio Advertising</i>		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought / held
Date <i>3/8/02</i>	Payee name <i>Lyons Jr. Lodge # 280</i>	Amount (\$) <i>150.00</i>
Payee address; City; State; Zip Code <i>4906 Eastside Dr. Austin, TX 78723</i>		
Purpose of expenditure <i>Breakfast Sponsorship</i>		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought / held
Date <i>3/12/07</i>	Payee name <i>DAN SMITH</i>	Amount (\$) <i>132.39</i>
Payee address; City; State; Zip Code <i>P.O. Box 8499 Austin, TX 78713</i>		
Purpose of expenditure <i>Re-imbursment Supplies</i>		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought / held

POLITICAL EXPENDITURES

SCHEDULE F

7/14

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME

Samuel T. Biscoe

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Payee name

7 Amount (\$)

3/12/02

Dan Smith
Payee address; City; State; Zip Code
P.O. Box 8499
Austin, TX 78713

380.00

8 Purpose of expenditure

Reimbursement / literature distribution

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

Office sought / held

Date

Payee name

Amount (\$)

3/14/02

Clear Choice Network
Payee address; City; State; Zip Code
2000 Vista Ln.
Austin, TX 78703

425.00

Purpose of expenditure

Graphic Design Services

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

Office sought / held

Date

Payee name

Amount (\$)

3/14/02

DAN Smith
Payee address; City; State; Zip Code
P.O. Box 8499
Austin, TX 78713

2000.00

Purpose of expenditure

Consulting Services

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

Office sought / held

Date

Payee name

Amount (\$)

3/14/02

Samuel T. Biscoe
Payee address; City; State; Zip Code
6411 Bridgewater Dr.
Austin, TX 78723

56.25

Purpose of expenditure

Reimbursement / Election Note Celebration
3/12/02

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

Office sought / held

POLITICAL EXPENDITURES

SCHEDULE F

8/14

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F:
2 FILER NAME <i>Samuel T. Biscoe</i>		3 ACCOUNT # (Ethics Commission filers)
4 Date <i>3/18/02</i>	5 Payee name <i>Sylvia Lopez</i>	7 Amount (\$) <i>1,575.00</i>
6 Payee address: <i>P.O. Box 1748</i> <i>Austin, TX 78767</i>		
8 Purpose of expenditure <i>Donation / Reception</i> <i>County Bond Kick off</i>		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name _____ Office sought / held _____
Date <i>3/20/02</i>	Payee name <i>Hispanic Connect</i>	Amount (\$) <i>1,100.00</i>
Payee address: <i>1903 Willow</i> <i>Austin, TX 78702</i>		
Purpose of expenditure <i>Sponsorship</i>		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name _____ Office sought / held _____
Date <i>3/20/02</i>	Payee name <i>Antioch Baptist Church</i>	Amount (\$) <i>150.00</i>
Payee address: <i>6222 Manor Rd</i> <i>Austin, TX 78723</i>		
Purpose of expenditure <i>Youth Fundraiser</i>		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name _____ Office sought / held _____
Date <i>3/21/02</i>	Payee name <i>Brenda Pennie</i>	Amount (\$) <i>128.64</i>
Payee address: <i>6503 Sandshot</i> <i>Austin, TX 78724</i>		
Purpose of expenditure <i>Re-imbursement</i> <i>office supplies</i>		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name _____ Office sought / held _____

POLITICAL EXPENDITURES

SCHEDULE F

2/14

The INSTRUCTION GUIDE explains how to complete this form.	1 Total pages Schedule F:
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2 FILER NAME <i>Samuel T. Biscoe</i>	3 ACCOUNT # (Ethics Commission filers)
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4 Date <i>3/23/02</i>	5 Payee name <i>Rolling Thunder Tides Austin</i>	7 Amount (\$) <i>250.00</i>
6 Payee address; City; State; Zip Code <i>1802 W. 6th St. Austin, TX 78701</i>		

8 Purpose of expenditure <i>Donation</i>	9 .. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought / held
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Date <i>3/25/02</i>	Payee name <i>Newsweek</i>	Amount (\$) <i>24.00</i>
Payee address; City; State; Zip Code <i>P.O. Box 59924 Boulder, Co. 80321</i>		

Purpose of expenditure <i>Magazine Subscription</i>	.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought / held
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Date <i>4/5/02</i>	Payee name <i>Worley Printing</i>	Amount (\$) <i>447.00</i>
Payee address; City; State; Zip Code <i>3217 N. I.H. 35 Austin, TX 78722</i>		

Purpose of expenditure <i>Printing Services</i>	.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought / held
--	--

Date <i>4/18/02</i>	Payee name <i>KKLB - 92.5 FM.</i>	Amount (\$) <i>240.00</i>
Payee address; City; State; Zip Code <i>7524 N. Lamar Blvd Austin, TX 78752</i>		

Purpose of expenditure <i>Radio Advertising</i>	.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought / held
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POLITICAL EXPENDITURES

SCHEDULE F

10/14

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME

Samuel T. Biscoe

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Payee name

Cinco de Mayo Committee

7 Amount (\$)

4/24/02

6 Payee address;

City; State; Zip Code

c/o P.O. Box 1748
Austin, TX 78767

\$25.00

8 Purpose of expenditure

Sponsorship

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

Office sought / held

Date

Payee name

Susan Spataro

Amount (\$)

4/25/02

Payee address;

City; State; Zip Code

c/o P.O. Box 1748
Austin TX 78767

\$20.00

Purpose of expenditure

Re-imbursement for lunch meeting with District Judge

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

Office sought / held

Date

Payee name

RGS Printing

Amount (\$)

4/25/02

Payee address;

City; State; Zip Code

1309 Rutledge Blvd. Lt 140
Austin, TX 78753

\$2004.63

Purpose of expenditure

Printing Services

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

Office sought / held

Date

Payee name

Jack & Jill of America

Amount (\$)

4/28/02

Payee address;

City; State; Zip Code

P.O. Box 13471
Austin, TX 78719

\$50.00

Purpose of expenditure

Advertising / Souvenir Booklet

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

Office sought / held

POLITICAL EXPENDITURES

SCHEDULE F

11/14

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 1

2 FILER NAME Samuel T. Biscoe

3 ACCOUNT # (Ethics Commission filers)

4 Date
5/15/02

5 Payee name
Jan Smith
6 Payee address; City; State; Zip Code
P.O. Box 8499
Austin, TX 78713

7 Amount (\$)
119.90

8 Purpose of expenditure
Re-imbursment 4/12/02
Soft Drinks / Timbercreek
Clean-up

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

Date
5/24/02

Payee name
Samuel T. Biscoe
Payee address; City; State; Zip Code
6411 Bridge water Dr.
Austin, TX 78723

Amount (\$)
1105.00

Purpose of expenditure
(Mileage - Re-imbursment)

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

Date
6/3/02

Payee name
Bonnie Eberhardt
Payee address; City; State; Zip Code
Austin Business Journal
111 Congress Suite 750
Austin, TX 78701

Amount (\$)
155.00

Purpose of expenditure
Health Summit Registration

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

Date
6/2/02

Payee name
Austin Lesbian / Gay Rights
Payee address; City; State; Zip Code
P.O. Box 2340
Austin, TX 78768

Amount (\$)
1200.00

Purpose of expenditure
Donation

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

POLITICAL EXPENDITURES

SCHEDULE F

12/14

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F:
2 FILER NAME <i>Samuel T. Biscoe</i>		3 ACCOUNT # (Ethics Commission filers)
4 Date <i>6/5/02</i>	5 Payee name <i>Sam Biscoe Special Projects Fundraising Committee</i>	7 Amount (\$) <i>525.00</i>
6 Payee address; City; State; Zip Code <i>P.O. Box 1748 Austin, TX 78760</i>		
8 Purpose of expenditure <i>Sponsorship</i>		9 .. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought / held
Date <i>5/5/02</i>	Payee name <i>Diana's Flower Shop</i>	Amount (\$) <i>597.02</i>
Payee address; City; State; Zip Code <i>2614 E. 7th St. Austin, TX 78702</i>		
Purpose of expenditure <i>Flowers for Funeral Services</i>		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought / held
Date <i>5/5/02</i>	Payee name <i>Travis County Democratic Party</i>	Amount (\$) <i>400.00</i>
Payee address; City; State; Zip Code <i>P.O. Box 684263 Austin, TX 78763-4263</i>		
Purpose of expenditure <i>Advertising in Primary 2012 "Austin Democrat"</i>		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought / held
Date <i>6/5/02</i>	Payee name <i>Summit Center for Counseling & Pastoral Care</i>	Amount (\$) <i>100.00</i>
Payee address; City; State; Zip Code <i>5425 A Burnet Austin, TX 78756</i>		
Purpose of expenditure <i>Donation</i>		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought / held

POLITICAL EXPENDITURES

SCHEDULE F

13/14

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME

Samuel T. Biscoe

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Payee name

7 Amount (\$)

4/12/02

Brenda Pennie

6 Payee address; City; State; Zip Code
*6503 Sandshot
Austin, TX 78724*

1,547.71

8 Purpose of expenditure

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

Office sought / held

Office Supplies

Date

Payee name

Amount (\$)

4/20/02

Carol CARTER

6 Payee address; City; State; Zip Code
*P.O. Box 1748
Austin, TX 78767*

15.00

Purpose of expenditure

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

Office sought / held

Teatenth - T. Short

Date

Payee name

Amount (\$)

4/21/02

Travis County Democratic Party

6 Payee address; City; State; Zip Code
*P.O. Box 634263
Austin, TX 78768-4263*

1,500.00

Purpose of expenditure

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

Office sought / held

Contribution

Date

Payee name

Amount (\$)

4/23/02

Kartside Story

6 Payee address; City; State; Zip Code
*Dewitty Center 1st Fl
1800 Rosewood Ave.
Austin, TX 78702*

1,200.00

Purpose of expenditure

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

Office sought / held

Sponsors hip / Annual Fundraiser

POLITICAL EXPENDITURES

SCHEDULE F

14/14

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME

Samuel T. Biscoe

3 ACCOUNT # (Ethics Commission filers)

4 Date
6/25/02

5 Payee name
Eastside Story Kickball League
6 Payee address; City; State; Zip Code
c/o Jo Thomas
11615 Maybach Dr.
Deller Valley, TX 78017

7 Amount (\$)
\$20.00

8 Purpose of expenditure
Donation

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

Date
7/5/02

Payee name
Central Star Lodge
Payee address; City; State; Zip Code
13 PO Box W # 163
7237 Hwy 290 E
Austin, TX 78723

Amount (\$)
\$30.00

Purpose of expenditure
Ad for 30th Anniversary -
Booklet

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

Date
7/5/02

Payee name
Eagle Speaker
Payee address; City; State; Zip Code
6263 McNeil Dr.
Austin, TX 78729-7590

Amount (\$)
\$50.00

Purpose of expenditure
Advertising

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

Date

Payee name
Payee address; City; State; Zip Code

Amount (\$)

Purpose of expenditure

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