

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

5223

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: *11/14*

14 pages

3 CANDIDATE / OFFICEHOLDER NAME

TITLE FIRST MI
Judge Samuel T
NICKNAME LAST SUFFIX
Biscoe

OFFICE USE ONLY

Date Received

02 OCT -7 PM 4:37
RECEIVED
ETHICS COMMISSION

4 CANDIDATE / OFFICEHOLDER ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
*6411 Bridgewater Dr.
Austin, TEXAS 78723*

Change of Address

5 CAMPAIGN TREASURER NAME

TITLE FIRST MI
Eugene
NICKNAME LAST SUFFIX
BAILY

Receipt #

HD / PM

Amount

Date Processed

Date Imaged

6 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
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 THROUGH Month Day Year
9 / 16 / 02 THROUGH 10 / 7 / 02

10 ELECTION

ELECTION DATE ELECTION TYPE
Month Day Year Primary Runoff General Special
11 / 5 / 02

11 OFFICE

OFFICE HELD (if any) OFFICE SOUGHT (if known)
Travis County Judge 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 Samuel T Biscoe 15 ACCOUNT # (Ethics Commission filers)

16 SUPPORTING POLITICAL COMMITTEE(S)

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

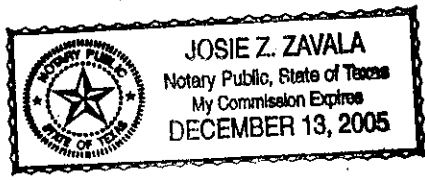
<input type="checkbox"/> additional pages	<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME <u>N/A</u>
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

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)	\$ 10,750
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ —
	4. TOTAL POLITICAL EXPENDITURES	\$ 16,128.42
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 7th day of October 2002, to certify which, witness my hand and seal of office.

Josie Z. Zavala

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:

(7 pages)

2 FILER NAME

Samuel T. Buscon

3 ACCOUNT # (Ethics Commission filers)

4 Date

7/16/02

5 Full name of contributor

out of state PAC

Hispanic Contractors Association

6 Contributor address; City; State; Zip Code

P.O. Box 17322
Austin, TX 70

Texas PAC

7 Amount of contribution (\$)

1,500.00

8 In-kind contribution description (if applicable)

9 Principal occupation

10 Employer (optional)

Date

7/16/02

Full name of contributor

out of state PAC

James Gomez

Contributor address; City; State; Zip Code

2118 Lyndbrook Dr.
Austin, TX 78748

Amount of contribution (\$)

1,100.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date

8/8/02

Full name of contributor

out of state PAC

William B. Tammage

Contributor address; City; State; Zip Code

1714 Cliffwood
Austin, TX 78733

Amount of contribution (\$)

1,100.00

In-kind contribution description (if applicable)

Principal occupation

Architect

Employer (optional)

Date

8/22/02

Full name of contributor

out of state PAC

David Roberts

Contributor address; City; State; Zip Code

2008 S. Congress
Austin, TX 78704

Amount of contribution (\$)

1,150.00

In-kind contribution description (if applicable)

Principal occupation

Businessman

Employer (optional)

Date

8/23/02

Full name of contributor

out of state PAC

Steve Adler

Contributor address; City; State; Zip Code

1502 W. Ben White
Austin, TX 78704-7606

Amount of contribution (\$)

1,100.00

In-kind contribution description (if applicable)

Principal occupation

Businessman

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>8/23/02</i>	5 Full name of contributor <i>Gloria Archiga</i> <input type="checkbox"/> out of state PAC	6 Contributor address; City; State; Zip Code <i>2713 E. 2nd St. Austin, TX 78702</i>		7 Amount of contribution (\$) <i>1,500.00</i>	8 In-kind contribution description (if applicable)
9 Principal occupation <i>Businesswoman</i>			10 Employer (optional)		
Date <i>8/19/02</i>	Full name of contributor <i>Rich Walker</i> <input type="checkbox"/> out of state PAC	Contributor address; City; State; Zip Code <i>905 E. 7th St Austin, TX 78702</i>		Amount of contribution (\$) <i>1,570.00</i>	In-kind contribution description (if applicable)
Principal occupation <i>Businessman</i>			Employer (optional)		
Date <i>8/30/02</i>	Full name of contributor <i>Herb Evans</i> <input type="checkbox"/> out of state PAC	Contributor address; City; State; Zip Code <i>1302 West Ave. Austin, TX 78701</i>		Amount of contribution (\$) <i>1,250.00</i>	In-kind contribution description (if applicable)
Principal occupation <i>Attorney</i>			Employer (optional)		
Date <i>8/24/02</i>	Full name of contributor <i>Sami G. Hanna</i> <input type="checkbox"/> out of state PAC	Contributor address; City; State; Zip Code <i>9528 Big View Dr.</i>		Amount of contribution (\$) <i>1,500.00</i>	In-kind contribution description (if applicable)
Principal occupation <i>Engineer</i>			Employer (optional)		
Date <i>8/29/02</i>	Full name of contributor <i>Michael R. Hatcher</i> <input type="checkbox"/> out of state PAC	Contributor address; City; State; Zip Code <i>114 Swift Current Trail Austin, TX 78744</i>		Amount of contribution (\$) <i>1,250.00</i>	In-kind contribution description (if applicable)
Principal occupation <i>Engineer</i>			Employer (optional)		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

5/14

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

Samuel T. Biscare

3 ACCOUNT # (Ethics Commission filers)

4 Date

9/6/02

5 Full name of contributor

Andrews + Kurth TEXAS

out of state PAC

6 Contributor address; City; State; Zip Code

PAC
600 Travis Suite 4200
Houston, TX 77012

7 Amount of contribution (\$)

1,000.00

8 In-kind contribution description (if applicable)

9 Principal occupation

ATTORNEYS

10 Employer (optional)

Date

9/25/02

Full name of contributor

B Mc PAC

out of state PAC

Contributor address; City; State; Zip Code

111 Congress Suite 1400
Austin, TX 78701

Amount of contribution (\$)

1,000.00

In-kind contribution description (if applicable)

Principal occupation

ATTORNEYS

Employer (optional)

Date

9/23/02

Full name of contributor

Fulbright + Jaworski

out of state PAC

Contributor address; City; State; Zip Code

TEXAS Com.
1307 McKinney Suite
Houston, TX 77010 5100

Amount of contribution (\$)

1,000.00

In-kind contribution description (if applicable)

Principal occupation

ATTORNEYS

Employer (optional)

Date

9/25/02

Full name of contributor

Thomas M. Giamboni

out of state PAC

Contributor address; City; State; Zip Code

3312 Bryker Dr.
Austin, TX 78703

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

Principal occupation

Businessman

Employer (optional)

Date

9/25/02

Full name of contributor

Terry Bray

out of state PAC

Contributor address; City; State; Zip Code

Graves, Dwyer + Hearon,
P.O. Box 58
Austin, TX 78769

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

6/14

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

Samuel T. Boscoe

3 ACCOUNT # (Ethics Commission filers)

4 Date

9/25/02

5 Full name of contributor

out of state PAC

David Armstrong

6 Contributor address; City; State; Zip Code

*Arroyo Street + Brown
100 Congress Ave. Suite
Austin, TX 78701*

7 Amount of contribution (\$)

500.00

8 In-kind contribution description (if applicable)

9 Principal occupation

Attorney

10 Employer (optional)

Date

9/25/02

Full name of contributor

out of state PAC

Doug Simpson

Contributor address; City; State; Zip Code

*18854 Calle Crema
San Antonio, TX 78258-4632*

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

Principal occupation

Businessman

Employer (optional)

Date

9/25/02

Full name of contributor

out of state PAC

Herb Evans

Contributor address; City; State; Zip Code

*1302 West Ave.
Austin, TX 78701-1916*

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

Principal occupation

Attorney

Employer (optional)

Date

9/25/02

Full name of contributor

out of state PAC

George Prall Jr.

Contributor address; City; State; Zip Code

*323 Athos Circle
Georgetown, TX 78628*

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

Principal occupation

Engineer

Employer (optional)

Date

9/25/02

Full name of contributor

out of state PAC

Roy Ewing

Contributor address; City; State; Zip Code

*10900 Parkfield Dr.
Austin, TX 78759*

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

7/14

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

Samuel T. Biscoe

3 ACCOUNT # (Ethics Commission filers)

4 Date

9/25/02

5 Full name of contributor

Tommy G. Warren

out of state PAC

7 Amount of contribution (\$)

250.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

*P.O. Box 9269
The Woodlands, TX 77387*

9 Principal occupation

Businessman

10 Employer (optional)

Date

9/25/02

Full name of contributor

Joseph Lynn Nabers

out of state PAC

Amount of contribution (\$)

200.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

*Suite 100-86
6034 W. Courtyard Dr.
Austin, TX 78730-5070*

Principal occupation

Employer (optional)

Date

9/25/02

Full name of contributor

Robert Kamm

out of state PAC

Amount of contribution (\$)

150.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

*405 W. 14th St.
Austin, TX 78701*

Principal occupation

Attorney

Employer (optional)

Date

9/25/02

Full name of contributor

Eduardo Martinez

out of state PAC

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

*711 Brunster Circle
Austin, TX 78703*

Principal occupation

Marketing Consultant

Employer (optional)

Date

9/25/02

Full name of contributor

Thomas Spacker

out of state PAC

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

*Box 2202
5217 Old Spicewood Springs
Austin, TX 78731*

Principal occupation

Marketing Consultant

Employer (optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

8/14

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>9/25/01</i>	5 Full name of contributor <i>Lee Flores</i> <input type="checkbox"/> out of state PAC	7 Amount of contribution (\$) <i>15/00⁰⁰</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>307-M Cuernavaca Austin, TX 78733</i>			
9 Principal occupation <i>Engineer</i>		10 Employer (optional)	
Date <i>9/25/02</i>	Full name of contributor <i>E. Scott Palikov</i> <input type="checkbox"/> out of state PAC	Amount of contribution (\$) <i>5/00⁰⁰</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>3903 Duval St. Austin, TX 78751-5107</i>			
Principal occupation		Employer (optional)	
Date <i>9/23/02</i>	Full name of contributor <i>Rev. + Mrs. Marvin Griffin</i> <input type="checkbox"/> out of state PAC	Amount of contribution (\$) <i>5/100⁰⁰</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2432 Barton Hills Dr. Austin, TX 78704</i>			
Principal occupation <i>Minister</i>		Employer (optional)	
Date <i>9/25/02</i>	Full name of contributor <i>DAVID LINN EVAN</i> <input type="checkbox"/> out of state PAC	Amount of contribution (\$) <i>550⁰⁰</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>404 Westwood Ter. Austin, TX 78746-5354</i>			
Principal occupation <i>Engineer</i>		Employer (optional)	
Date <i>9/25/02</i>	Full name of contributor <i>Flynn Lee</i> <input type="checkbox"/> out of state PAC	Amount of contribution (\$) <i>525⁰⁰</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>P.O. Box 6277 Austin, TX 78762</i>			
Principal occupation		Employer (optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

9/14

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>9/25/02</i>	5 Full name of contributor <i>Dwayne Kottor</i> <input type="checkbox"/> out of state PAC	7 Amount of contribution (\$) <i>125.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>4909 Carson Hill Dr. Austin, TX 78723</i>			
9 Principal occupation		10 Employer (optional)	
Date <i>9/22/02</i>	Full name of contributor <i>Alex Ogunmuyinwa</i> <input type="checkbox"/> out of state PAC	Amount of contribution (\$) <i>250.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1921 Elysian Fields Austin, TX 78727</i>			
Principal occupation <i>Businessman</i>		Employer (optional)	
Date <i>9/30/02</i>	Full name of contributor <i>Austin Bd of Realtors</i> <input type="checkbox"/> out of state PAC	Amount of contribution (\$) <i>1000.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>4106 Medical Parkway Austin, TX 78756-3700</i>			
Principal occupation <i>Realtors</i>		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)	

POLITICAL EXPENDITURES

SCHEDULE F

10/14

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F: (5 pages)
2 FILER NAME <i>Samuel T. Biscoe</i>		3 ACCOUNT # (Ethics Commission filers)
4 Date <i>7/23/02</i>	5 Payee name <i>Roscoe Parker</i>	7 Amount (\$) <i>1,000.00</i>
6 Payee address; City; State; Zip Code <i>765 W. Hester St. Austin, TX 78756</i>		
8 Purpose of expenditure <i>Political Consulting Services</i>		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held
Date <i>7/23/02</i>	Payee name <i>KAZI - Radio</i>	Amount (\$) <i>1,200.00</i>
Payee address; City; State; Zip Code <i>8906 Wall St. Austin, TX 78723</i>		
Purpose of expenditure <i>Sponsorship / Fundraiser</i>		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held
Date <i>8/9/02</i>	Payee name <i>Victory Ministries</i>	Amount (\$) <i>35.00</i>
Payee address; City; State; Zip Code <i>2903 E. Cesar Chavez St. Austin, TX 78702</i>		
Purpose of expenditure <i>Donation</i>		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held
Date <i>8/9/02</i>	Payee name <i>Clear Choice Network</i>	Amount (\$) <i>1,299.00</i>
Payee address; City; State; Zip Code <i>P.O. Box 13520 Austin, TX 78711</i>		
Purpose of expenditure <i>Advertising</i>		** 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:

2 FILER NAME

Samuel T. Biscoe

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Payee name

7 Amount (\$)

8/15/02

Clear Choice Network

6 Payee address; City; State; Zip Code

*P.O. Box 13522
Austin, TX 78711*

*1
\$1,197.07*

8 Purpose of expenditure

Advertising

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

Office sought / held

Date

Payee name

Amount (\$)

8/15/02

Brenda Pennie

Payee address; City; State; Zip Code

*6503 Sandeshof
Austin, TX 78724*

*1
\$27.59*

Purpose of expenditure

*Reimbursement
(office supplies)*

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

Office sought / held

Date

Payee name

Amount (\$)

9/10/02

La Penra

Payee address; City; State; Zip Code

*1704 E. 5th St.
Austin, TX 78702*

*1
\$480.00*

Purpose of expenditure

Advertising

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

Office sought / held

Date

Payee name

Amount (\$)

9/13/02

Robyn T. Emerson

Payee address; City; State; Zip Code

*2501 Garner Mill Ln.
Austin, TX 78744*

*1
\$300.00*

Purpose of expenditure

Political Consulting Services

.. 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>8/30/02</i>	5 Payee name <i>Clear Choices Network</i>	7 Amount (\$) <i>1,2619.⁶²</i>
6 Payee address; City; State; Zip Code <i>P.O. Box 1352 Austin, TX 78711</i>		
8 Purpose of expenditure <i>Advertising</i>		9 .. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought / held
Date <i>9/20/02</i>	Payee name <i>Dan Smith</i>	Amount (\$) <i>160.⁸⁰</i>
Payee address; City; State; Zip Code <i>P.O. Box 8499 Austin, TX 78713</i>		
Purpose of expenditure <i>Re-imburement copies & postage</i>		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought / held
Date <i>9/20/02</i>	Payee name <i>Diana's Flower Shop</i>	Amount (\$) <i>71.95</i>
Payee address; City; State; Zip Code <i>2614 E. 7th St. Austin, TX 78702</i>		
Purpose of expenditure <i>Flowers / Funeral</i>		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought / held
Date <i>9/26/02</i>	Payee name <i>Dan Smith</i>	Amount (\$) <i>524.⁵⁰</i>
Payee address; City; State; Zip Code <i>P.O. Box 8499 Austin, TX 78713</i>		
Purpose of expenditure <i>Re-imburement YARD Sign Stakes & Postage</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:
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2 FILER NAME <i>Samuel T. Biscoe</i>	3 ACCOUNT # (Ethics Commission filers)
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4 Date <i>9/20/02</i>	5 Payee name <i>Greater East Austin Youth Assoc.</i>	7 Amount (\$) <i>1/5100.00</i>
6 Payee address; City; State; Zip Code <i>4713 Bandera Rd. Austin, TX 78721</i>		

8 Purpose of expenditure <i>Sponsorship / Fundraiser</i>	9 .. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought / held
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Date <i>9/24/02</i>	Payee name <i>Michael Lofton</i>	Amount (\$) <i>1/5250.00</i>
Payee address; City; State; Zip Code <i>4708 Oak Cliff Dr. Austin, TX 78721</i>		

Purpose of expenditure <i>Advertising / Taping</i>	.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought / held
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Date <i>9/26/02</i>	Payee name <i>Doubletree Guest Suites</i>	Amount (\$) <i>1/51054.66</i>
Payee address; City; State; Zip Code <i>303 W. 15th St. Austin, TX 78701</i>		

Purpose of expenditure <i>Fundraiser Expense</i>	.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought / held
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Date <i>10/1/02</i>	Payee name <i>KLBJ - Radio AM</i>	Amount (\$) <i>1/51500.00</i>
Payee address; City; State; Zip Code <i>8309 N. IH 35 Austin, TX 78753</i>		

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

SCHEDULE F

10/14

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>10/1/02</i>	5 Payee name <i>Travis County Democratic Party</i>	7 Amount (\$) <i>5,400.00</i>
6 Payee address; City; State; Zip Code <i>4201 S. Congress Ave. Suite 302 Austin, TX 78745</i>		
8 Purpose of expenditure <i>Donation</i>		9 .. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought / held
Date <i>10/4/02</i>	Payee name <i>Jimmy Chambers</i>	Amount (\$) <i>1,300.00</i>
Payee address; City; State; Zip Code <i>16409 Sunny Dr. Austin, TX 78723</i>		
Purpose of expenditure <i>Funeral Expense/Donation</i>		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought / held
Date <i>10/4/02</i>	Payee name <i>Worley Printing</i>	Amount (\$) <i>1,970.73</i>
Payee address; City; State; Zip Code <i>3217. W. 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	Payee name	Amount (\$)
Payee address; City; State; Zip Code		
Purpose of expenditure		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought / held