

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## 5252

# 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:

*19 pages*

3 CANDIDATE / OFFICEHOLDER NAME

TITLE FIRST MI  
*Judge Samuel T*  
NICKNAME LAST SUFFIX  
*BISCOE*

OFFICE USE ONLY

Date Received  
*NOV 28 PM 5:30*

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 #

HO / 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, TX 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  
*10 / 8 / 02 THROUGH 10 / 28 / 02*

10 ELECTION

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

11 OFFICE

OFFICE HELD (if 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

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

2/19

14 C/OH NAME

*Samuel T Biscoe*

15 ACCOUNT # (Ethics Commission files)

16 SUPPORTING POLITICAL COMMITTEE(S)

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

COMMITTEE TYPE

COMMITTEE NAME

*N/A*

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

17 NO REPORTABLE ACTIVITY

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

18 CONTRIBUTION TOTALS

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

\$ *1819.00*

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

\$ *25,909.00*

EXPENDITURE TOTALS

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

\$ *—*

4. TOTAL POLITICAL EXPENDITURES

\$ *29,069.65*

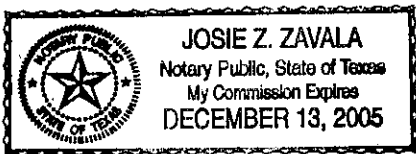
OUTSTANDING LOAN TOTALS

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 *28<sup>th</sup>* day of *October* *2002*, to certify which, witness my hand and seal of office.

*Josie Z. Zavala*  
Signature of officer administering oath

Print name of officer administering oath

Title of officer administering oath

# POLITICAL EXPENDITURES

# SCHEDULE F

3/19

The INSTRUCTION GUIDE explains how to complete this form.	1 Total pages Schedule F <i>(3 pages)</i>
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2 FILER NAME <i>Samuel T. Biscoe</i>	3 ACCOUNT # (Ethics Commission filers)
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4 Date <i>10/8/02</i>	5 Payee name <i>Austin Travis M &amp; M R</i>	7 Amount (\$) <i>1,250.00</i>
6 Payee address; City; State; Zip Code <i>1430 Collins Austin, TX 78704</i>		

8 Purpose of expenditure <i>(donation / sponsorship)</i>	9 <input type="checkbox"/> Complete if direct expenditure to benefit C/OH <input type="checkbox"/> Candidate / Officeholder name Office sought / held
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Date <i>10/9/02</i>	Payee name <i>Dan Smith</i>	Amount (\$) <i>1,200.00</i>
Payee address; City; State; Zip Code <i>P.O. Box 8499 Austin, TX 78713</i>		

Purpose of expenditure <i>Reimbursement / office supplies for Camp. office</i>	<input type="checkbox"/> Complete if direct expenditure to benefit C/OH <input type="checkbox"/> Candidate / Officeholder name Office sought / held
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Date <i>10/15/02</i>	Payee name <i>Pichy Green</i>	Amount (\$) <i>1,100.00</i>
Payee address; City; State; Zip Code <i>12345 Alameda Trace Cir. Austin, TX 78727</i>		

Purpose of expenditure <i>Production Cost.</i>	<input type="checkbox"/> Complete if direct expenditure to benefit C/OH <input type="checkbox"/> Candidate / Officeholder name Office sought / held
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Date <i>10/15/02</i>	Payee name <i>Creative Consultants</i>	Amount (\$) <i>1,1937.50</i>
Payee address; City; State; Zip Code <i>1411 W. 6th St. Austin, TX 78701</i>		

Purpose of expenditure <i>Fundraiser Expense</i>	<input type="checkbox"/> Complete if direct expenditure to benefit C/OH <input type="checkbox"/> Candidate / Officeholder name Office sought / held
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POLITICAL EXPENDITURES

SCHEDULE F

4/19

The INSTRUCTION GUIDE explains how to complete this form. 1 Total pages Schedule F:

2 FILER NAME Samuel T. Bisore 3 ACCOUNT # (Ethics Commission filers)

4 Date 5 Payee name 7 Amount (\$) 10/17/02 Tim Peterson 550.00 Payee address; City; State; Zip Code P.O. Box 1317 Bastrop, TEXAS

8 Purpose of expenditure 9 .. Complete if direct expenditure to benefit C/OH .. Entertainment Expense / FDRS. Candidate / Officeholder name Office sought / held

Date Payee name Amount (\$) 10/27/02 RBH Direct 13,558.30 Payee address; City; State; Zip Code 1602 Glencrest Dr. Austin, Tx 78723

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

Date Payee name Amount (\$) 10/15/02 Dan Smith 552.00 Payee address; City; State; Zip Code P.O. Box 8499 Austin, Tx 78713

Purpose of expenditure .. Complete if direct expenditure to benefit C/OH .. Re-imbursment Postage, Kinko's, Fundraiser supplies Candidate / Officeholder name Office sought / held

Date Payee name Amount (\$) 10/16/02 Brenda Pennie 529.90 Payee address; City; State; Zip Code 6503 Sandshof Austin, Tx. 78724

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

POLITICAL EXPENDITURES

SCHEDULE F

5/18

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 (\$)
<i>10/18/02</i>	<i>Vernell Carlton</i>	<i>1.00</i>
	6 Payee address; City; State; Zip Code	
	<i>3724 Airport Blvd.</i>	<i>1200.</i>
	<i>Austin, TX 78702</i>	

8 Purpose of expenditure	9 ** Complete if direct expenditure to benefit C/OH **
<i>Staff Support</i>	Candidate / Officeholder name <span style="float: right;">Office sought / held</span>

Date	Payee name	Amount (\$)
<i>10/22/02</i>	<i>Austin Women's Political Caucus</i>	<i>2691.95</i>
	6 Payee address; City; State; Zip Code	
	<i>P.O. Box 141912</i>	
	<i>Austin, TX 78767</i>	

Purpose of expenditure	** Complete if direct expenditure to benefit C/OH **
<i>Printing &amp; Postage Expense</i>	Candidate / Officeholder name <span style="float: right;">Office sought / held</span>

Date	Payee name	Amount (\$)
	6 Payee address; City; State; Zip Code	

Purpose of expenditure	** Complete if direct expenditure to benefit C/OH **
	Candidate / Officeholder name <span style="float: right;">Office sought / held</span>

Date	Payee name	Amount (\$)
	6 Payee address; City; State; Zip Code	

Purpose of expenditure	** Complete if direct expenditure to benefit C/OH **
	Candidate / Officeholder name <span style="float: right;">Office sought / held</span>

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

6/19

The INSTRUCTION GUIDE explains how to complete this form.	1 Total pages Schedule A: <i>(14 pages)</i>
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2 FILER NAME <i>Samuel T Biscoe</i>	3 ACCOUNT # (Ethics Commission filer)
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4 Date <i>10/16/12</i>	5 Full name of contributor <i>Annie Davis</i> <input type="checkbox"/> out of state PAC	7 Amount of contribution (\$) <i>1100.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>5403 Chevy Circle Austin, TX 78723</i>			

9 Principal occupation	10 Employer (optional)
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Date <i>10/4/12</i>	Full name of contributor <i>American Federation of State County &amp; Municipal Employees PEOPLE</i> <input checked="" type="checkbox"/> out of state PAC	Amount of contribution (\$) <i>1100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1625 L. St. N.W. Washington, D.C. 20036</i>			

Principal occupation <i>Labor Union</i>	Employer (optional)
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Date <i>10/15/12</i>	Full name of contributor <i>Linda Borgan Giffon Blair</i> <input type="checkbox"/> out of state PAC	Amount of contribution (\$) <i>5500.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>P.O. Box 17428 Austin, Texas</i>			

Principal occupation	Employer (optional)
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Date <i>10/11/12</i>	Full name of contributor <i>Roberto J. Bayarri, M.D.</i> <input type="checkbox"/> out of state PAC	Amount of contribution (\$) <i>5500.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>8201 Hickory Creek Dr. Austin, TX 78735</i>			

Principal occupation <i>Doctor</i>	Employer (optional)
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Date <i>10/12/12</i>	Full name of contributor <i>Leisy Mellin</i> <input type="checkbox"/> out of state PAC	Amount of contribution (\$) <i>5100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>6418 Zadock Woods Dr. Austin, TX 78749</i>			

Principal occupation	Employer (optional)
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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

7/18

The INSTRUCTION GUIDE explains how to complete this form.	1 Total pages Schedule A:
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2 FILER NAME <i>Samuel T. Biscoe</i>	3 ACCOUNT # (Ethics Commission filers)
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4 Date <i>10/15/02</i>	5 Full name of contributor <i>Harvenetta M. Franklin</i> <input type="checkbox"/> out of state PAC	7 Amount of contribution (\$) <i>5250.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>1801 Psyquita Austin, TX 78702</i>			

9 Principal occupation	10 Employer (optional)
------------------------	------------------------

Date <i>10/18/02</i>	Full name of contributor <i>Kenneth A. Warner</i> <input type="checkbox"/> out of state PAC	Amount of contribution (\$) <i>500.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>6601 Winterberry Austin, TX 78750</i>			

Principal occupation	Employer (optional)
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Date <i>10/16/02</i>	Full name of contributor <i>C. Hill Rylander</i> <input type="checkbox"/> out of state PAC	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>612 Lindsay St. San Marcos, TX 78666</i>			

Principal occupation	Employer (optional)
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Date <i>10/16/02</i>	Full name of contributor <i>Heather Bull</i> <input type="checkbox"/> out of state PAC	Amount of contribution (\$) <i>500.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2315 Newfield Ln. Austin, TX 78703 - 2438</i>			

Principal occupation	Employer (optional)
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Date <i>10/4/02</i>	Full name of contributor <i>Linda Moore Smith</i> <input type="checkbox"/> out of state PAC	Amount of contribution (\$) <i>500.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>4906 Broadhill Austin, TX 78723</i>			

Principal occupation	Employer (optional)
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**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

**SCHEDULE A**

*8/19*

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 <i>9/22/02</i>	5 Full name of contributor <input type="checkbox"/> out of state PAC <i>Willie G. Williams</i>	7 Amount of contribution (\$) <i>50.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>600 S. 1st St #210 Austin, TX 78704</i>			

9 Principal occupation 10 Employer (optional)

Date <i>10/14/02</i>	Full name of contributor <input type="checkbox"/> out of state PAC <i>Karen Langley</i>	Amount of contribution (\$) <i>50.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>4200 Bridgwood Rd Austin, TX 78722</i>			

Principal occupation Employer (optional)

Date <i>10/14/02</i>	Full name of contributor <input type="checkbox"/> out of state PAC <i>John O Belle</i>	Amount of contribution (\$) <i>50.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>3108 E. 14th St. Austin, TX 78702</i>			

Principal occupation Employer (optional)

Date <i>10/6/02</i>	Full name of contributor <input type="checkbox"/> out of state PAC <i>Harold G. Wells</i>	Amount of contribution (\$) <i>25.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>P.O. Box 140384 Austin, TX 78764</i>			

Principal occupation Employer (optional)

Date <i>9/28/02</i>	Full name of contributor <input type="checkbox"/> out of state PAC <i>Lorita Pigeon</i>	Amount of contribution (\$) <i>10.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>7313 Luna Dr. Austin, TX 78745</i>			

Principal occupation Employer (optional)



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

2/18

The INSTRUCTION GUIDE explains how to complete this form.	1 Total pages Schedule A:
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2 FILER NAME <i>Samuel T. Biscoe</i>	3 ACCOUNT # (Ethics Commission filers)
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4 Date <i>10/18/02</i>	5 Full name of contributor <i>Turner, Collier, &amp; Braden</i> <input type="checkbox"/> out of state PAC	7 Amount of contribution (\$) <i>1,500.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>P.O. Box 130089 Houston, TX 772219</i>			

9 Principal occupation <i>Engineer</i>	10 Employer (optional)
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Date <i>9/30/02</i>	Full name of contributor <i>Vinson &amp; Elkins Texas PAC</i> <input type="checkbox"/> out of state PAC	Amount of contribution (\$) <i>1,000.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2300 First City Tower Houston, TX 77002-6760</i>			

Principal occupation <i>Law Firm</i>	Employer (optional)
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Date <i>10/22/02</i>	Full name of contributor <i>Mignon Mc Garry</i> <input type="checkbox"/> out of state PAC	Amount of contribution (\$) <i>1,250.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>P.O. Box 1501 Austin, TX 78767</i>			

Principal occupation <i>Consultant</i>	Employer (optional)
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Date <i>10/9/02</i>	Full name of contributor <i>Call Vending</i> <input type="checkbox"/> out of state PAC	Amount of contribution (\$) <i>1,250.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>905 E. 7th St. Austin, TX 78702</i>			

Principal occupation	Employer (optional)
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Date <i>10/7/02</i>	Full name of contributor <i>K B Home Central</i> <input type="checkbox"/> out of state PAC	Amount of contribution (\$) <i>1,250.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>11711 Burnett Rd. Austin, TX 78758</i>			

Principal occupation <i>Home builders</i>	Employer (optional)
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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**

10/18

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>10/2/02</i>	5 Full name of contributor <i>William Rogers</i> <input type="checkbox"/> out of state PAC	7 Amount of contribution (\$) <i>1,200.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>5201 Van Winkle Ln. Austin, TX 78739</i>			
9 Principal occupation		10 Employer (optional)	
Date <i>10/4/02</i>	Full name of contributor <i>Joel Bennett</i> <input type="checkbox"/> out of state PAC	Amount of contribution (\$) <i>1,200.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1404 Foxtail Cove Austin, TX 78704</i>			
Principal occupation <i>Attorney</i>		Employer (optional)	
Date <i>10/4/02</i>	Full name of contributor <i>Lymore &amp; Bernice Washington</i> <input type="checkbox"/> out of state PAC	Amount of contribution (\$) <i>1,250.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1435 9 Highlander Dr. Dallas, TX 75287-6442</i>			
Principal occupation		Employer (optional)	
Date <i>10/17/02</i>	Full name of contributor <i>Vickie Davis</i> <input type="checkbox"/> out of state PAC	Amount of contribution (\$) <i>125.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>7206 Chisos Pass Austin, TX 78724</i>			
Principal occupation		Employer (optional)	
Date <i>10/17/02</i>	Full name of contributor <i>John &amp; Patricia Boehm Jr.</i> <input type="checkbox"/> out of state PAC	Amount of contribution (\$) <i>1,200.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>58 St. Stephens School Austin, TX 78746</i>			
Principal occupation		Employer (optional)	

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

11/19

The INSTRUCTION GUIDE explains how to complete this form.	1 Total pages Schedule A:
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2 FILER NAME <i>Samuel T. Biscoe</i>	3 ACCOUNT # (Ethics Commission filers)
---	--

4 Date <i>10/17/02</i>	5 Full name of contributor <i>Michael Weaver</i> <input type="checkbox"/> out of state PAC	7 Amount of contribution (\$) <i>5100.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>1508 S. Lamar Austin, TX 78704</i>			

9 Principal occupation <i>Consultant</i>	10 Employer (optional)
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Date <i>10/16/02</i>	Full name of contributor <i>Thom Farrell</i> <input type="checkbox"/> out of state PAC	Amount of contribution (\$) <i>1250.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>3223 Park Hills Dr. Austin, TX 78746-5544</i>			

Principal occupation	Employer (optional)
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Date <i>10/23/02</i>	Full name of contributor <i>Eugene Watkins</i> <input type="checkbox"/> out of state PAC	Amount of contribution (\$) <i>125.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>6805 Falcata Cv. Austin, TX 78731</i>			

Principal occupation	Employer (optional)
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Date <i>10/17/02</i>	Full name of contributor <i>Harvey Davis</i> <input type="checkbox"/> out of state PAC	Amount of contribution (\$) <i>150.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>12604 Red Bud Trail Buda, TX 78610</i>			

Principal occupation	Employer (optional)
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Date <i>10/17/02</i>	Full name of contributor <i>Arlene Williams</i> <input type="checkbox"/> out of state PAC	Amount of contribution (\$) <i>150.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>10506 Erica Leigh Ct. Austin, TX 78724</i>			

Principal occupation	Employer (optional)
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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

12/18

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>10/17/04</i>	5 Full name of contributor <i>David Degrassi</i> <input type="checkbox"/> out of state PAC	7 Amount of contribution (\$) <i>540.<sup>00</sup></i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>P.O. Box 16171 Austin, TX 78714</i>			
9 Principal occupation		10 Employer (optional)	
Date <i>10/17/04</i>	Full name of contributor <i>Pat Ford</i> <input type="checkbox"/> out of state PAC	Amount of contribution (\$) <i>25.<sup>00</sup></i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>6814 Pioneer Pl. Austin, TX 78752</i>			
Principal occupation		Employer (optional)	
Date <i>10/22/02</i>	Full name of contributor <i>MARIE McPhaul</i> <input type="checkbox"/> out of state PAC	Amount of contribution (\$) <i>150.<sup>00</sup></i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>8501 Danville Dr. Austin, TX 78753</i>			
Principal occupation		Employer (optional)	
Date <i>10/24/02</i>	Full name of contributor <i>Point Construction</i> <input type="checkbox"/> out of state PAC	Amount of contribution (\$) <i>1100.<sup>00</sup></i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>11200 Westheimer #414 Austin, TX 77042</i>			
Principal occupation		Employer (optional)	
Date <i>10/22/02</i>	Full name of contributor <i>James R. Johnson</i> <input type="checkbox"/> out of state PAC	Amount of contribution (\$) <i>100.<sup>00</sup></i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>711 Churchill Farms Dr. Georgetown, TX 78626</i>			
Principal occupation		Employer (optional)	

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

13/19

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>10/22/02</i>	5 Full name of contributor <i>Harold G. Wells</i> <input type="checkbox"/> out of state PAC	7 Amount of contribution (\$) <i>150.<sup>00</sup></i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>P.O. Box 140381 Austin, TX 78740</i>			
9 Principal occupation		10 Employer (optional)	
Date <i>10/22/02</i>	Full name of contributor <i>Charles Walker</i> <input type="checkbox"/> out of state PAC	Amount of contribution (\$) <i>150.<sup>00</sup></i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>618 Blue Valley Dr. Austin, TX 78748</i>			
Principal occupation		Employer (optional)	
Date <i>10/22/02</i>	Full name of contributor <i>Cleve Moten</i> <input type="checkbox"/> out of state PAC	Amount of contribution (\$) <i>25.<sup>00</sup></i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>5206 Marymount Dr. Austin, TX 78723</i>			
Principal occupation <i>Attorney</i>		Employer (optional)	
Date <i>10/24/02</i>	Full name of contributor <i>Joe Bryant</i> <input type="checkbox"/> out of state PAC	Amount of contribution (\$) <i>25.<sup>00</sup></i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>8402 Roan Ln. Austin, TX 78736-3020</i>			
Principal occupation		Employer (optional)	
Date <i>10/22/02</i>	Full name of contributor <i>Renny Washington</i> <input type="checkbox"/> out of state PAC	Amount of contribution (\$) <i>120.<sup>00</sup></i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>4002 Danville Ln Austin, TX 78749</i>			
Principal occupation		Employer (optional)	

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

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

14/19

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>10/22/02</i>	5 Full name of contributor <i>James Sheard</i> <input type="checkbox"/> out of state PAC	7 Amount of contribution (\$) <i>120.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>6608 Highpoint Dr. Austin, TX 78723</i>			
9 Principal occupation		10 Employer (optional)	
Date <i>10/23/02</i>	Full name of contributor <i>Myron Jones</i> <input type="checkbox"/> out of state PAC	Amount of contribution (\$) <i>50.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>10500 Pickstar Austin, TX 78750</i>			
Principal occupation		Employer (optional)	
Date <i>10/13/02</i>	Full name of contributor <i>Alicia Perez</i> <input type="checkbox"/> out of state PAC	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1715 Palma Plaza Austin, TX 78703</i>			
Principal occupation		Employer (optional)	
Date <i>10/18/02</i>	Full name of contributor <i>Robert Wormley</i> <input type="checkbox"/> out of state PAC	Amount of contribution (\$) <i>120.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>P.O. Box 6426 Austin, TX 78768-2120</i>			
Principal occupation		Employer (optional)	
Date <i>10/17/02</i>	Full name of contributor <i>Herbert Evans</i> <input type="checkbox"/> out of state PAC	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1302 West Avenue Austin, TX 78701</i>			
Principal occupation		Employer (optional)	

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

15/18

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>10/25/02</i>	5 Full name of contributor <i>Travis County Sheriffs</i> <input type="checkbox"/> out of state PAC	7 Amount of contribution (\$) <i>\$1500.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>Law Enforcement PAC P.O. Box 141483 Austin, TX 78714</i>			
9 Principal occupation <i>Law Enforcement Assoc.</i>		10 Employer (optional)	
Date <i>10/24/02</i>	Full name of contributor <i>Lisa Berger, Cogsway, Blank</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>+ Sampson P.O. Box 17428 Austin, TX 78760</i>			
Principal occupation <i>Attorneys</i>		Employer (optional)	
Date <i>10/24/02</i>	Full name of contributor <i>RECA - Good Government</i> <input type="checkbox"/> out of state PAC	Amount of contribution (\$) <i>2000.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>NTE 98 San Jacinto Suite 180 Austin, TX 78701</i>			
Principal occupation		Employer (optional)	
Date <i>10/22/02</i>	Full name of contributor <i>Atkin, Gump, Straus</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>CHAMER Field Civic Action Com. 816 Congress Ave Suite Austin, TX 78701</i>			
Principal occupation <i>Attorneys</i>		Employer (optional)	
Date <i>10/24/02</i>	Full name of contributor <i>Charles Barnett</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>3999 Westlakes Dr. Austin, TX 78746</i>			
Principal occupation		Employer (optional)	

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

16/18

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>10/24/02</i>	5 Full name of contributor <i>Royce Faulkner</i> <input type="checkbox"/> out of state PAC	7 Amount of contribution (\$) <i>1</i> <i>5,000.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>P.O. Box 722</i> <i>Austin, TX 78767</i>			
9 Principal occupation <i>Contractor</i>		10 Employer (optional)	
Date <i>10/24/02</i>	Full name of contributor <i>Lowell H. Lebermann Jr.</i> <input type="checkbox"/> out of state PAC	Amount of contribution (\$) <i>1</i> <i>5,000.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>3834 Promontory Point Dr.</i> <i>Austin, TX 78744</i>			
Principal occupation <i>Businessman</i>		Employer (optional)	
Date <i>10/24/02</i>	Full name of contributor <i>Ben Barnes</i> <input type="checkbox"/> out of state PAC	Amount of contribution (\$) <i>1</i> <i>500.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>98 San Jacinto Blvd</i> <i>Austin, TX 78701</i>			
Principal occupation <i>Businessman</i>		Employer (optional)	
Date <i>10/24/02</i>	Full name of contributor <i>Kirk Ruddy</i> <input type="checkbox"/> out of state PAC	Amount of contribution (\$) <i>1</i> <i>500.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2111 Highgrove Ter.</i> <i>Austin, TX 78703</i>			
Principal occupation		Employer (optional)	
Date <i>10/24/02</i>	Full name of contributor <i>Ambrose + Brown</i> <input type="checkbox"/> out of state PAC	Amount of contribution (\$) <i>1</i> <i>500.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>100 Congress Ave</i> <i>Suite 1300</i> <i>Austin, TX 78701</i>			
Principal occupation <i>Attorneys</i>		Employer (optional)	

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

17/19

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

10/24/02

5 Full name of contributor

Tim Hendricks

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

5105 Turnabout Ln.  
Austin, TX 78721

9 Principal occupation

10 Employer (optional)

Date

10/23/02

Full name of contributor

Education Austin PAC

out of state PAC

Amount of contribution (\$)

1,500.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

316 W. 12th St.  
Austin, TX 78701

Principal occupation

Teachers Union

Employer (optional)

Date

10/12/02

Full name of contributor

John Lindner

out of state PAC

Amount of contribution (\$)

1,500.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

241 Woodland Dr.  
Driftwood, TX 78019

Principal occupation

Employer (optional)

Date

10/12/02

Full name of contributor

Henry Smith

out of state PAC

Amount of contribution (\$)

1,250.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

11413 Silman Mill  
Austin, TX 78739

Principal occupation

Employer (optional)

Date

10/12/02

Full name of contributor

Billy G. Gately

out of state PAC

Amount of contribution (\$)

1,250.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

251 Goodnight Trail  
Dripping Springs, TX 78620

Principal occupation

Employer (optional)

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

18/17

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

*10/24/02*

5 Full name of contributor

*Jose I. Guerra*  out of state PAC

6 Contributor address; City; State; Zip Code

*708 Castle Ridge Rd.  
Austin, TX 78746-5154*

7 Amount of contribution (\$)

*500.<sup>00</sup>*

8 In-kind contribution description (if applicable)

9 Principal occupation

*Engineer*

10 Employer (optional)

Date

*10/25/02*

Full name of contributor

*Keith Young*  out of state PAC

Contributor address; City; State; Zip Code

*7315 Scenic BRK Dr.  
Austin TX 78736-0738*

Amount of contribution (\$)

*500.<sup>00</sup>*

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date

*10/25/02*

Full name of contributor

*Suz DeLuz*  out of state PAC

Contributor address; City; State; Zip Code

*12320 Farrow Cove  
#B  
Austin, TX 78753*

Amount of contribution (\$)

*200.<sup>00</sup>*

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date

*10/24/02*

Full name of contributor

*Howard Falkenberg*  out of state PAC

Contributor address; City; State; Zip Code

*P.O. Box 123  
Austin, TX 78757*

Amount of contribution (\$)

*250.<sup>00</sup>*

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date

*10/22/02*

Full name of contributor

*Patricia Hayes*  out of state PAC

Contributor address; City; State; Zip Code

*5903 Lonesome Valley Trail  
Austin, TX 78731*

Amount of contribution (\$)

*100.<sup>00</sup>*

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

12/19

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

5 Full name of contributor

out of state PAC

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

*10/23/02*

*TOM MAYES*

6 Contributor address; City; State; Zip Code

*P.O. Box 104  
McNeil, TX 78651-0104*

*1  
\$100.<sup>00</sup>*

9 Principal occupation

*Realtor*

10 Employer (optional)

Date

Full name of contributor

out of state PAC

Amount of contribution (\$)

In-kind contribution description (if applicable)

*10/23/02*

*Thomas Gallagher*

Contributor address; City; State; Zip Code

*2501 Velasquez Dr.  
Austin, TX 78703*

*1  
\$100.<sup>00</sup>*

Principal occupation

Employer (optional)

Date

Full name of contributor

out of state PAC

Amount of contribution (\$)

In-kind contribution description (if applicable)

*10/24/02*

*Looby Liddell & SARK*

Contributor address; City; State; Zip Code

*600 Travis St.  
Houston, TX 77002 Suite 3400*

*1  
\$1000.<sup>00</sup>*

Principal occupation

*Attorneys*

Employer (optional)

Date

Full name of contributor

out of state PAC

Amount of contribution (\$)

In-kind contribution description (if applicable)

*10/12/02*

*David Newberger*

Contributor address; City; State; Zip Code

*2905 San Gabriel  
Austin, TX 78705 Suite 218*

*1  
\$500.<sup>00</sup>*

Principal occupation

Employer (optional)

Date

Full name of contributor

out of state PAC

Amount of contribution (\$)

In-kind contribution description (if applicable)

*10/25/02*

*Glen Opel*

Contributor address; City; State; Zip Code

*830 Castle Ridge Rd.  
Austin, TX 7874*

*1  
\$500.<sup>00</sup>*

Principal occupation

*ATTORNEY*

Employer (optional)

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