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

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

5416

FORM C/OH COVER SHEET PG 1

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

1 ACCOUNT # (Ethics Commission filers): 6302003

2 Total pages this report: 1/4

OFFICE USE ONLY

Date Received

FILED FOR RECORD 03 JUL 14 AM 11:53 DANA DEBEAUVOIR COUNTY CLERK TRAVIS COUNTY TEXAS

Date Hand-delivered or Date Postmarked

Receipt # | Amount

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

TITLE | FIRST: RON | MI

NICKNAME | LAST: DAVIS | SUFFIX

4 CANDIDATE / OFFICEHOLDER ADDRESS

☐ Change of Address

ADDRESS / PO BOX: P.O. 16665 | APT / SUITE #: | CITY: Austin | STATE: TX | ZIP CODE: 78761

5 CAMPAIGN TREASURER NAME

TITLE | FIRST: Louis | MI

NICKNAME | LAST: Simms | SUFFIX

6 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE): 7501 Barcelona Dr. | APT / SUITE #: | CITY: Austin | STATE: TX | ZIP CODE: 78752

7 CAMPAIGN TREASURER PHONE

AREA CODE: (512) | PHONE NUMBER: 453-5322 | EXTENSION

8 REPORT TYPE

- [X] 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: 01/01/2003 THROUGH Month Day Year: 06/30/2003

10 ELECTION

ELECTION DATE Month Day Year: 11/02/2004

ELECTION TYPE

- [ ] Primary
- [ ] Runoff
- [X] General
- [ ] Special

11 OFFICE

OFFICE HELD (if any): Other – Travis County Commissioner Pct 1

12 OFFICE SOUGHT (if known)

13 DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS

-- Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. --

Name

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

☐ additional pages

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME
RON DAVIS

15 ACCOUNT # (Ethics Commission filers)
6302003

16 NOTICE FROM POLITICAL COMMITTEE(S)

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

COMMITTEE TYPE	COMMITTEE NAME
☐ GENERAL	COMMITTEE ADDRESS
☐ SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages

17 NO REPORTABLE ACTIVITY

☐ Check here if no reportable activity occured during this reporting period (Sign 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)	$ 0.00

EXPENDITURE TOTALS

3.	TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$ 0.00
4.	TOTAL POLITICAL EXPENDITURES	$ 221.57

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
DECEMBER 06, 2006

Signature of Candidate or Officeholder

AFFIX NORARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____ RON DAVIS _____, this the 14th day of July 2003, to certify which, witness my hand and seal of office.

Felicitas B. Chavez — Signature of officer administering oath
Felicitas B. Chavez — Print name of officer administering oath
Notary Public — Title of officer administering oath

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 3/4

2 FILER NAME
RON DAVIS

3 ACCOUNT # (Ethics Commission filers)
6302003

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
04/23/2003	Cinco De Miyo 314 W. 11th Street Suite 525 Austin TX 78701	25.00

8 Purpose of expenditure (See instructions regarding type of information required.)
Donation for cultural awareness and development

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
06/24/2003	Office Max 5451 N. IH35 Austin TX 78723	51.95

Purpose of expenditure (See instructions regarding type of information required.)
1000 campaign business cards

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
05/10/2003	Old L.C. Anderson Alumni Association P.O. Box 2713 Austin TX 78768	60.00

Purpose of expenditure (See instructions regarding type of information required.)
1/4 page advertisement in alumni book

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
05/17/2003	Postmaster 8225 Cross Park Dr. Austin TX 78754	38.00

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

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: 4/4

2 FILER NAME
RON DAVIS

3 ACCOUNT # (Ethics Commission files)
6302003

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
04/23/2003	Sam Biscoe Special Project 314 West 11th Street Austin TX 78701	25.00

8 Purpose of expenditure (See instructions regarding type of information required.)
Donation for Cultural awareness and development

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
06/18/2003	Walmart 1030 Norwood Park Austin TX 78754	21.62

Purpose of expenditure (See instructions regarding type of information required.)
Black ink for printer

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