

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

5453

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:	
3 CANDIDATE / OFFICEHOLDER NAME	TITLE	FIRST	MI	OFFICE USE ONLY 2003 JUL 15 PM 4:45 CLERK COUNTY CLERK TRAVIS COUNTY, TEXAS FILED FOR RECORD	
	NICKNAME	LAST	SUFFIX		
4 CANDIDATE / OFFICEHOLDER ADDRESS	ADDRESS / PO BOX:	APT / SUITE #:	CITY:	STATE:	ZIP CODE
<input type="checkbox"/> Change of Address	5703 Spurflower Dr.		Austin	TX	78759
5 CAMPAIGN TREASURER NAME	TITLE	FIRST	MI	Date Received	
	NICKNAME	LAST	SUFFIX	Date Hand-delivered or Date Postmarked	
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE):	APT / SUITE #:	CITY:	STATE:	ZIP CODE
	5703 Spurflower Dr.		Austin	TX	78759
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
	(512)	338-1269			
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)				
9 PERIOD COVERED	Month	Day	Year	THROUGH	Month Day Year
	3	11	03		7 / 15 / 03
10 ELECTION	ELECTION DATE		ELECTION TYPE		
	Month	Day	Year	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	
	3	2	04		
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known)		
	Travis County Attorney		Travis County Attorney		
13 NOTICE OF 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				
	NA				
Address / PO Box: Apt. / Suite #: City: State: Zip Code					
<input type="checkbox"/> additional pages					
GO TO PAGE 2					

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME
David Albert Escamilla

15 ACCOUNT # (Ethics Commission files)

16 NOTICE FROM POLITICAL COMMITTEE(S)

** This box is for notice of 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
<input type="checkbox"/> GENERAL	NA
<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS
	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

additional pages

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)

\$ 43,683.50

EXPENDITURE TOTALS

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

\$ —

4. TOTAL POLITICAL EXPENDITURES

\$ 2002.27

OUTSTANDING LOAN TOTALS

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

\$ 0 NA

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.

D. A. Escamilla

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said *David A. Escamilla*, this the 15th day of July, 2003, to certify which, witness my hand and seal of office.

Bindy S. Trautmann
Signature of officer administering oath



BINDY S. TRAUTMANN
Notary Public, State of Texas
My Commission Expires
FEB. 18, 2005

Printed name of officer administering oath

Title of officer administering oath

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH,
SC-SPAC, SPAC, & SPAC-SS)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A1:
~~18~~ 19

2 FILER NAME
David A. Escamilla

3 ACCOUNT # (Ethics Commission filers)

4 Date: 5/27/03
5 Full name of contributor out-of-state PAC (ID#:)
Minton, Burton, Foster & Collins, P.C.
6 Contributor address; City; State; Zip Code
1100 Guadalupe St. Austin, TX 78701

7 Amount of contribution (\$): 1500.⁰⁰
8 In-kind contribution description (if applicable):

9 Principal occupation (Optional) 10 Employer (Optional)

Date: 5/29/03
Full name of contributor out-of-state PAC (ID#:)
Granger and Mueller, P.C.
Contributor address; City; State; Zip Code
605 W. 10th St Austin, TX 78701

Amount of contribution (\$): 1000.⁰⁰
In-kind contribution description (if applicable):

Principal occupation (Optional) Employer (Optional)

Date: 6/13/03
Full name of contributor out-of-state PAC (ID#:)
Kristina Davis Jones
Contributor address; City; State; Zip Code
3903 Duval St. Austin, TX 78751

Amount of contribution (\$): 500.⁰⁰
In-kind contribution description (if applicable):

Principal occupation (Optional) Employer (Optional)

Date: 6/05/03
Full name of contributor out-of-state PAC (ID#:)
Tim Jamail
Contributor address; City; State; Zip Code
151 South First St., Suite 200
Austin, TX 78704

Amount of contribution (\$): 750.⁰⁰
In-kind contribution description (if applicable):

Principal occupation (Optional) Employer (Optional)

Date: 6/18/03
Full name of contributor out-of-state PAC (ID#:)
Robert C. Carr
Contributor address; City; State; Zip Code
L-Bar Cattle & Equipment Co. LLC.
4826 Highway 71E, Del Valle, TX 78617

Amount of contribution (\$): 500.⁰⁰
In-kind contribution description (if applicable):

Principal occupation (Optional) 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 A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH,
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1 Total pages this Schedule A1:
~~8~~ 19

2 FILER NAME
David A. Escamilla

3 ACCOUNT # (Ethics Commission files)

4 Date
6/18/03

5 Full name of contributor out-of-state PAC (ID#: _____)
Jack Roberts
6 Contributor address; City; State; Zip Code
400 W. 15th St. Austin TX 78701

7 Amount of contribution (\$)
500.00

8 In-kind contribution description (if applicable)

9 Principal occupation (Optional)

10 Employer (Optional)

Date
6/18/03

Full name of contributor out-of-state PAC (ID#: _____)
Williams & Forsythe
Contributor address; City; State; Zip Code
100 West Ave Austin, TX 78701

Amount of contribution (\$)
1000.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date
6/26/03

Full name of contributor out-of-state PAC (ID#: _____)
Graves Dougherty Hearon & Moody, P.C.
Contributor address; City; State; Zip Code
P.O. Box 98 Austin, TX 78767

Amount of contribution (\$)
250.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date
6/26/03

Full name of contributor out-of-state PAC (ID#: _____)
Clarke Heidrick
Contributor address; City; State; Zip Code
2300 Bank of America Tower
515 Congress Ave., Austin, TX 78701

Amount of contribution (\$)
250.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date
7/08/03

Full name of contributor out-of-state PAC (ID#: _____)
Minton, Burton, Foster & Collins, P.C.
Contributor address; City; State; Zip Code
1100 Guadalupe St., Austin, TX 78701

Amount of contribution (\$)
2500.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1

(FOR FORMS C/OH, C/OH-SS, SC-C/OH,
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19

2 FILER NAME

David A. Escamilla

3 ACCOUNT # (Ethics Commission files)

4 Date

7/10/03

5 Full name of contributor out-of-state PAC (ID#)

David Botsford

6 Contributor address; City; State; Zip Code

1307 West Ave. Austin, TX 78701

7 Amount of contribution (\$)

2500.00

8 In-kind contribution description (if applicable)

9 Principal occupation (Optional)

10 Employer (Optional)

Date

7/08/03

Full name of contributor out-of-state PAC (ID#)

David O. Chambers

Contributor address; City; State; Zip Code

1104 Nueces, Suite 208
Austin, TX 78701

Amount of contribution (\$)

2500.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

7/08/03

Full name of contributor out-of-state PAC (ID#)

Paul Dunham Law Firm

Contributor address; City; State; Zip Code

P.O. Box 684666, Austin, TX 78768

Amount of contribution (\$)

2500.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

7/08/03

Full name of contributor out-of-state PAC (ID#)

Vinson & Elkins Texas PAC

Contributor address; City; State; Zip Code

2300 First City Tower
Houston, TX 77002-6760

Amount of contribution (\$)

2500.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

7/09/03

Full name of contributor out-of-state PAC (ID#)

Granger and Mueller, P.C.

Contributor address; City; State; Zip Code

605 W. 10th St.
Austin, TX 78701

Amount of contribution (\$)

~~1000.00~~
1000.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

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19

2 FILER NAME

David Escamilla

3 ACCOUNT # (Ethics Commission files)

4 Date:

7/09/03

5 Full name of contributor out-of-state PAC (ID#: _____)

Brown McCarroll PAC

7 Amount of contribution (\$)

1000.00

8 In-kind contribution description (if applicable)

6 Contributor address: City; State; Zip Code

Suite 1400
111 Congress Ave., Austin, TX 78701

9 Principal occupation (Optional)

10 Employer (Optional)

Date

7/03/03

Full name of contributor out-of-state PAC (ID#: _____)

Gary L. Rodriguez

Amount of contribution (\$)

1000.00

In-kind contribution description (if applicable)

Contributor address: City; State; Zip Code

4311 South First St.
Austin, TX 78745

Principal occupation (Optional)

Employer (Optional)

Date

7/10/03

Full name of contributor out-of-state PAC (ID#: _____)

Jamie Balagia

Amount of contribution (\$)

1000.00

In-kind contribution description (if applicable)

Contributor address: City; State; Zip Code

310 Murray Ave.
P.O. Box 360 Manor, TX 78653

Principal occupation (Optional)

Employer (Optional)

Date

7/07/03

Full name of contributor out-of-state PAC (ID#: _____)

Randy T. Leavitt

Amount of contribution (\$)

1000.00

In-kind contribution description (if applicable)

Contributor address: City; State; Zip Code

1110 Exton Cove
Austin, TX 78733

Principal occupation (Optional)

Employer (Optional)

Date:

7/10/03

Full name of contributor out-of-state PAC (ID#: _____)

Christopher M. Gunter, P.C.

Amount of contribution (\$)

1000.00

In-kind contribution description (if applicable)

Contributor address: City; State; Zip Code

600 W. 9th St.
Austin, TX 78701-2212

Principal occupation (Optional)

Employer (Optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH,
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2 FILER NAME

David A. Escamilla

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Full name of contributor out-of-state PAC (ID# _____)

Armbrust & Brown, L.L.P.

7/07/03

6 Contributor address; City; State; Zip Code
100 Congress Ave., Suite 1300
Austin, TX 78701

7 Amount of contribution (\$)

1000.00

8 In-kind contribution description (if applicable)

9 Principal occupation (Optional)

10 Employer (Optional)

Date

Full name of contributor out-of-state PAC (ID# _____)

Joseph A. Turner

7/10/03

Contributor address; City; State; Zip Code

11217 Fitzhugh Rd.
Austin, TX 78736

Amount of contribution (\$)

1000.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

Full name of contributor out-of-state PAC (ID# _____)

Scott, Douglass & McConnico, L.L.P.

7/09/03

Contributor address; City; State; Zip Code
600 Congress Avenue, 15th Floor
Austin, TX 78701

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

Full name of contributor out-of-state PAC (ID# _____)

Clark, Thomas & Winters, P.C.

7/09/03

Contributor address; City; State; Zip Code

P.O. Box 1148
Austin, TX 78767

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

Full name of contributor out-of-state PAC (ID# _____)

Fitzgerald & Meissner, P.C.

7/10/03

Contributor address; City; State; Zip Code

812 San Antonio, Suite 400
Austin, TX 78701

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

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2 FILER NAME

David A. Escamilla

3 ACCOUNT # (Ethics Commission filers)

4 Date

7/10/03

5 Full name of contributor out-of-state PAC (ID# _____)

Kuhn Doyle & Kuhn, P.C.

6 Contributor address; City; State; Zip Code

603 W. 8th St.
Austin, TX 78701

7 Amount of contribution (\$)

500.00

8 In-kind contribution description (if applicable)

9 Principal occupation (Optional)

10 Employer (Optional)

Date

7/10/03

Full name of contributor out-of-state PAC (ID# _____)

Florez, Keel & Nassour, L.L.P.

Contributor address; City; State; Zip Code

704 W. 9th St.
Austin, TX 78701

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

7/03/03

Full name of contributor out-of-state PAC (ID# _____)

Betty Blackwell

Contributor address; City; State; Zip Code

1306 Nueces St.
Austin, TX 78701

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

7/08/03

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 (\$)

500.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

7/08/03

Full name of contributor out-of-state PAC (ID# _____)

Mark P. McCrimmon

Contributor address; City; State; Zip Code

900 Rio Grande
Austin, TX 78701

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

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**POLITICAL CONTRIBUTIONS
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2 FILER NAME

David A. Escamilla

3 ACCOUNT # (Ethics Commission filers)

4 Date

7/07/03

5 Full name of contributor out-of-state PAC (ID#:

David A. Sheppard

6 Contributor address; City; State; Zip Code

700 Lavaca #1550
Austin, TX 787017 Amount of
contribution (\$)

500.00

8 In-kind contribution
description (if applicable)

9 Principal occupation (Optional)

10 Employer (Optional)

Date

7/09/03

Full name of contributor out-of-state PAC (ID#:

Fritz, Byrne and Head L.L.P.

Contributor address; City; State; Zip Code

98 San Jacinto Blvd, Suite 2000
Austin, TX 78701Amount of
contribution (\$)

500.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

7/07/03

Full name of contributor out-of-state PAC (ID#:

James M. & Tracy Walters McCormack

Contributor address; City; State; Zip Code

9804 Scenic Bluff Dr.
Austin, TX 78733Amount of
contribution (\$)

500.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

7/08/03

Full name of contributor out-of-state PAC (ID#:

Christopher Lee Elliott

Contributor address; City; State; Zip Code

2405 Westover Rd.
Austin, TX 78703Amount of
contribution (\$)

500.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

7/10/03

Full name of contributor out-of-state PAC (ID#:

Antonio Wehnes

Contributor address; City; State; Zip Code

1602 E. 7th St.
Austin, TX 78702Amount of
contribution (\$)

250.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
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2 FILER NAME

David A. Escamilla

3 ACCOUNT # (Ethics Commission filers)

4 Date

7/03/03

5 Full name of contributor out-of-state PAC (ID#:

Thomas, Hudson & Nelson, L.L.P.

6 Contributor address; City; State; Zip Code

3305 Northland Dr., Suite 301
Austin, TX 78731

7 Amount of contribution (\$)

250.00

8 In-kind contribution description (if applicable)

9 Principal occupation (Optional)

10 Employer (Optional)

Date

7/08/03

Full name of contributor out-of-state PAC (ID#:

Hall & Kleeman, P.L.L.C.

Contributor address; City; State; Zip Code

1515 South Capital of Texas Highway
Suite 415 Austin, TX 78746

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

7/10/03

Full name of contributor out-of-state PAC (ID#:

Thad E. Son

Contributor address; City; State; Zip Code

104 Cold Water Lane
Austin, TX 78734

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

7/09/03

Full name of contributor out-of-state PAC (ID#:

Dubravka Romano & Terry Frakes

Contributor address; City; State; Zip Code

4105 Sinclair Ave.
Austin, TX 78756

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

7/10/03

Full name of contributor out-of-state PAC (ID#:

Gabriel B. Gutierrez, Jr.

Contributor address; City; State; Zip Code

7932 Wheel Rim Circle
Austin, TX 78749

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

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2 FILER NAME

David A. Escamilla

3 ACCOUNT # (Ethics Commission filers)

4 Date

7/10/03

5 Full name of contributor out-of-state PAC (ID# _____)

Daniel H. Byrne

6 Contributor address; City; State; Zip Code

36 Sundown Parkway
Austin, TX 787467 Amount of
contribution (\$)

250.00

8 In-kind contribution
description (if applicable)

9 Principal occupation (Optional)

10 Employer (Optional)

Date

7/09/03

Full name of contributor out-of-state PAC (ID# _____)

Janet Stockard

Contributor address; City; State; Zip Code

607 W. 9th St.
Austin, TX 78701Amount of
contribution (\$)

250.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

7/10/03

Full name of contributor out-of-state PAC (ID# _____)

Nate Stark

Contributor address; City; State; Zip Code

900 Rio Grande
Austin, TX 78701Amount of
contribution (\$)

250.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

7/10/03

Full name of contributor out-of-state PAC (ID# _____)

Watson, Bishop, London & Brophy, P.C.

Contributor address; City; State; Zip Code

106 E. 6th, Suite 700
Austin, TX 78701Amount of
contribution (\$)

250.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

7/10/03

Full name of contributor out-of-state PAC (ID# _____)

George & Donaldson, L.L.P.

Contributor address; City; State; Zip Code

1100 Norwood Tower
114 W. 7th St. Austin, TX 78701Amount of
contribution (\$)

250.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A1
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2 FILER NAME David A. Escamilla		3 ACCOUNT # (Ethics Commission files)	
4 Date 7/10/03	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Mack Ray Hernandez	7 Amount of contribution (\$) 250.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 524 N. Lamar Blvd, Suite 202 Austin, TX 78703			
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 7/10/03	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Ketor Parks and Weiser P.L.L.C	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 812 San Antonio St. Suite 100 Austin, TX 78701			
Principal occupation (Optional)		Employer (Optional)	
Date 7/10/03	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Alberto Garcia	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1715 S. First St. Austin, TX 78704			
Principal occupation (Optional)		Employer (Optional)	
Date 7/10/03	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Dan Dworin	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 700 Lavaca, Suite 1550 Austin, TX 78701			
Principal occupation (Optional)		Employer (Optional)	
Date 7/07/03	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Bruce S. Fox	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 404 W. 13th St. Austin, TX 78701			
Principal occupation (Optional)		Employer (Optional)	

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SC-SPAC, SPAC, & SPAC-SS)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A1:

19

2 FILER NAME

David A. Escamilla

3 ACCOUNT # (Ethics Commission filers)

4 Date

7/07/03

5 Full name of contributor out-of-state PAC (ID#: _____)

David L. Shapiro

6 Contributor address; City; State; Zip Code

1200 San Antonio St.
Austin, TX 787017 Amount of
contribution (\$)

250.00

8 In-kind contribution
description (if applicable)

9 Principal occupation (Optional)

10 Employer (Optional)

Date

7/10/03

Full name of contributor out-of-state PAC (ID#: _____)

Catherine A. Mauzy

Contributor address; City; State; Zip Code

700 Lavaca St. Suite 1150
Austin, TX 78701Amount of
contribution (\$)

200.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

7/08/03

Full name of contributor out-of-state PAC (ID#: _____)

Watson M. Howell, Jr. P.C.

Contributor address; City; State; Zip Code

1104 Nueces St., Suite 207
Austin, TX 78701Amount of
contribution (\$)

150.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

7/10/03

Full name of contributor out-of-state PAC (ID#: _____)

John A. Yeager

Contributor address; City; State; Zip Code

1012 Rio Grande St.
Austin, TX 78701Amount of
contribution (\$)

100.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

7/10/03

Full name of contributor out-of-state PAC (ID#: _____)

Rene Reyes

Contributor address; City; State; Zip Code

1715 South 1st St.
Austin, TX 78704Amount of
contribution (\$)

100.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

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 A1
(FOR FORMS C/DH, C/DH-SS, SC-C/DH,
SC-SPAC, SPAC, & SPAC-SS)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this Schedule A1: 19	
2 FILER NAME David A. Escamilla		3 ACCOUNT # (Ethics Commission filers)	
4 Date 7/09/03	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Todd H. Williams	7 Amount of contribution (\$) 100.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 505 W. 7th St. #115 Austin, TX 78701			
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 7/10/03	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Mike Kelly	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4806 Timberline Dr. Austin, TX 78746			
Principal occupation (Optional)		Employer (Optional)	
Date 7/10/03	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: John & Janie Dameron	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 11700 Running Fox Tr. Austin, TX 78759			
Principal occupation (Optional)		Employer (Optional)	
Date 7/10/03	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Paul S. Ruiz	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 309 Cumberland Rd Austin, TX 78704			
Principal occupation (Optional)		Employer (Optional)	
Date 7/10/03	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: John C. Heal, Jr.	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 500 W. 13th St. Austin, TX 78701			
Principal occupation (Optional)		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 A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH,
SC-SPAC, SPAC, & SPAC-SS)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages (this Schedule A1): 19	
2 FILER NAME David A. Escamilla		3 ACCOUNT # (Ethics Commission filers)	
4 Date 7/10/03	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Maria Luisa Flores & Scott M. Hendler 6 Contributor address; City; State; Zip Code 1300 Alta Vista Ave Austin, TX 78704	7 Amount of contribution (\$) 100.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 7/10/03	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Steve Turro Contributor address; City; State; Zip Code 404 W. 13th St. Austin, TX 78701	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 7/07/03	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Tim LaFrey Contributor address; City; State; Zip Code 8507 Alverstone Way Austin, TX 78759	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 7/10/03	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Lorri Michel Contributor address; City; State; Zip Code 5338 Painted Shield Dr. Austin, TX 78735	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 7/09/03	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Thomas M. Pollan Contributor address; City; State; Zip Code 2908 Doyer Place Austin, TX 78757	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		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 A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH,
SC-SPAC, SPAC, & SPAC-SS)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A1:

19

2 FILER NAME

David A. Escamilla

3 ACCOUNT # (Ethics Commission filers)

4 Date

7/10/03

5 Full name of contributor out-of-state PAC (ID#: _____)

El Sol Y La Luna

6 Contributor address; City; State; Zip Code

1224 S. Congress Ave.
Austin, TX 78704

7 Amount of contribution (\$)

100.00

8 In-kind contribution description (if applicable)

9 Principal occupation (Optional)

10 Employer (Optional)

Date

7/10/03

Full name of contributor out-of-state PAC (ID#: _____)

Myra McDaniel

Contributor address; City; State; Zip Code

3910 Knollwood
Austin, TX 78731

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

7/09/03

Full name of contributor out-of-state PAC (ID#: _____)

Bonnie C. Lockhart

Contributor address; City; State; Zip Code

7206 Foxtree Cove
Austin, TX 78750

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

7/09/03

Full name of contributor out-of-state PAC (ID#: _____)

Dr. Sydney W. Falk, Jr.

Contributor address; City; State; Zip Code

1011 Shelley Ave
Austin, TX 78703

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

7/11/03

Full name of contributor out-of-state PAC (ID#: _____)

Kelly L. Hyten

Contributor address; City; State; Zip Code

5710 Carry Back Ln.
Austin, TX 78746

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH,
SC-SPAC, SPAC, & SPAC-SS)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A1: **18**

2 FILER NAME

David A. Escamilla

3 ACCOUNT # (Ethics Commission filers)

4 Date

7/10/03

5 Full name of contributor out-of-state PAC (ID# _____)

Clay Strange

6 Contributor address; City; State; Zip Code
**106 E. Littlefield Building Center, Suite 900
Austin, TX 78701**

7 Amount of contribution (\$)

50.00

8 In-kind contribution description (if applicable)

9 Principal occupation (Optional)

10 Employer (Optional)

Date

7/10/03

Full name of contributor out-of-state PAC (ID# _____)

Duffy Keever

Contributor address; City; State; Zip Code
**7206 Lamplight Ln.
Austin, TX 78731**

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

7/10/03

Full name of contributor out-of-state PAC (ID# _____)

Hector L. Rivero

Contributor address; City; State; Zip Code
**6101 Shadow Mountain Dr.
Austin, TX 78731**

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

7/10/03

Full name of contributor out-of-state PAC (ID# _____)

Gilberto Ocanas

Contributor address; City; State; Zip Code
**1503 West Huisache
San Antonio, TX 78201**

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

7/10/03

Full name of contributor out-of-state PAC (ID# _____)

Douglas G. Caroom

Contributor address; City; State; Zip Code
**3704 Greenway St.
Austin, TX 78705**

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH,
SC-SPAC, SPAC, & SPAC-SS)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A1: **19**

2 FILER NAME

David A. Escamilla

3 ACCOUNT # (Ethics Commission filers)

4 Date

7/10/03

5 Full name of contributor out-of-state PAC (ID#)

Bruce Elfant

6 Contributor address; City; State; Zip Code

1205 Fairwood
Austin, TX 78722

7 Amount of contribution (\$)

50.00

8 In-kind contribution description (if applicable)

9 Principal occupation (Optional)

10 Employer (Optional)

Date

7/10/03

Full name of contributor out-of-state PAC (ID#)

Douglas A. Fohn

Contributor address; City; State; Zip Code

5604 Southwest Parkway Apt. # 3218

Amount of contribution (\$)

40.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

7/11/03

Full name of contributor out-of-state PAC (ID#)

Tracy L. Seiler

Contributor address; City; State; Zip Code

12509 Praece Dr.
Austin, TX 78729

Amount of contribution (\$)

26.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

7/10/03

Full name of contributor out-of-state PAC (ID#)

John Philip Donisi

Contributor address; City; State; Zip Code

P.O. Box 684442
Austin, TX 78768

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

7/9/03

Full name of contributor out-of-state PAC (ID#)

R. Michael Anderson

Contributor address; City; State; Zip Code

2521 Jarratt Ave
Austin, TX 78703

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

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 A1

(FOR FORMS C/OH, C/OH-SS, SC-C/OH,
SC-SPAC, SPAC, & SPAC-SS)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A1: **19**

2 FILER NAME

David A. Escamilla

3 ACCOUNT # (Ethics Commission files)

4 Date

7/10/03

5 Full name of contributor

out-of-state PAC (ID#: _____)

Veronica Rivera

6 Contributor address; City; State; Zip Code
12349 Metric Blvd, Apt. 2027
Austin, TX 78758

7 Amount of contribution (\$)

25.00

8 In-kind contribution description (if applicable)

9 Principal occupation (Optional)

10 Employer (Optional)

Date

7/10/03

Full name of contributor

out-of-state PAC (ID#: _____)

Geronimo M. Rodriguez Jr.

Contributor address; City; State; Zip Code
1604-B Waterloo Trail
Austin, TX 78704

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

7/10/03

Full name of contributor

out-of-state PAC (ID#: _____)

Seth Kretzer

Contributor address; City; State; Zip Code
12326 Silo Ln.
Houston, TX 77071

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

7/10/03

Full name of contributor

out-of-state PAC (ID#: _____)

Gonzalo & Emma Barrientos

Contributor address; City; State; Zip Code
2906 Gem Circle
Austin, TX 78704

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

6/20/03

Full name of contributor

out-of-state PAC (ID#: _____)

Minton Burton Foster & Collins, P.C.

Contributor address; City; State; Zip Code
1100 Guadalupe St.
Austin, TX 78701

Amount of contribution (\$)

12.50

In-kind contribution description (if applicable)

Metal fence stakes
for campaign
signage
5 @ \$2.50/per

Principal occupation (Optional)

Employer (Optional)

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH,
SC-SPAC, SPAC, & SPAC-SS)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this Schedule A1: 18	
2 FILER NAME David A. Escamilla		3 ACCOUNT # (Ethics Commission filers)	
4 Date 7/10/03	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Sandra Ritz	7 Amount of contribution (\$) 4000.00 4000.00	8 In-kind contribution description (if applicable) 4000.00 facilities, food & drink for fundraiser
6 Contributor address; City; State; Zip Code 1104 Nueces Austin, TX 78701			
9 Principal occupation (Optional)		10 Employer (Optional)	
Date: 7/10/03	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Sherine Thomas	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable) Supplies
Contributor address; City; State; Zip Code 2309 Ferswood Circle Austin, TX 78704			
Principal occupation (Optional)		Employer (Optional)	
Date 7/10/03	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Mark Dreyfus	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) CASH
Contributor address; City; State; Zip Code 5902 Tumbling Circle Austin, TX 78731			
Principal occupation (Optional)		Employer (Optional)	
Date 7/10/03	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Brewster McCracken	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable) CASH
Contributor address; City; State; Zip Code 7613 Rockpoint Dr. Austin, TX 78731			
Principal occupation (Optional)		Employer (Optional)	
Date 7/10/03	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Leonard Saenz	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable) CASH
Contributor address; City; State; Zip Code 5213 Boudin Creek Tr. Austin, TX 78735			
Principal occupation (Optional)		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 A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH,
SC-SPAC, SPAC, & SPAC-SS)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this Schedule A1: 19	
2 FILER NAME David A. Escamilla		3 ACCOUNT # (Ethics Commission filers)	
4 Date 7/10/03	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Ryan Duran	7 Amount of contribution (\$) 30.00 CASH	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 2205 Bonita St. Austin, TX			
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 7/10/03	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Graham Keaver	Amount of contribution (\$) 25.00 CASH	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 7206 Lamplight Austin, TX 78731			
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code			
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code			
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code			
Principal occupation (Optional)		Employer (Optional)	

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

PLEGGED CONTRIBUTIONS

SCHEDULE B1

(FOR FORMS C/OH, SC-C/OH, SC-SPAC, & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule B1:

1

2 FILER NAME

David A. Escamilla

3 ACCOUNT # (Ethics Commission filers)

4 TOTAL OF UNITEMIZED PLEDGES:

\$

5 Date

7/10/03

6 Full name of pledgor out-of-state PAC (ID#)

Fulbright & Jaworski

7 Pledgor address; City; State; Zip Code

600 Congress Ave, Suite 2400
Austin, TX 78701

8 Amount of pledge (\$)

2500.00

9 In-kind description (if applicable)

10 Principal occupation (optional)

11 Employer (optional)

Date

7/10/03

Full name of pledgor out-of-state PAC (ID#)

Minter Joseph and Thornhill

Pledgor address; City; State; Zip Code

811 Barton Springs Rd.
Austin, TX 78704

Amount of pledge (\$)

500.00

In-kind description (if applicable)

Principal occupation (optional)

Employer (optional)

Date

Full name of pledgor out-of-state PAC (ID#)

Pledgor address; City; State; Zip Code

Amount of pledge (\$)

In-kind description (if applicable)

Principal occupation (optional)

Employer (optional)

Date

Full name of pledgor out-of-state PAC (ID#)

Pledgor address; City; State; Zip Code

Amount of pledge (\$)

In-kind description (if applicable)

Principal occupation (optional)

Employer (optional)

Date

Full name of pledgor out-of-state PAC (ID#)

Pledgor address; City; State; Zip Code

Amount of pledge (\$)

In-kind description (if applicable)

Principal occupation (optional)

Employer (optional)

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2

2 FILER NAME

David A. Escamilla

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Payee name

7 Amount (\$)

5/27/03

Travis County Democratic Party

6 Payee address; City; State; Zip Code
706 West MLK, Jr. Blvd, Suite 8
Austin, Tx 78701

1000.00

8 Purpose of payment (See instructions regarding type of information required.)

political contribution

9 -- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name Office sought Office held

Date

Payee name

Amount (\$)

5/28/03

Nuevo Leon Restaurant

6 Payee address; City; State; Zip Code
1501 E. 6th St.
Austin, TX 78702

571.52

Purpose of payment (See instructions regarding type of information required.)

Hispanic
Political reception - facility, food & drink

-- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name Office sought Office held

Date

Payee name

Amount (\$)

6/11/03

Liberty Bank

6 Payee address; City; State; Zip Code
P.O. Box 2167
Austin, TX 78768-2167

54.55

Purpose of payment (See instructions regarding type of information required.)

Bank books & checking supplies for
Campaign Account

-- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name Office sought Office held

Date

Payee name

Amount (\$)

7/03/03

U.S.P.S.

6 Payee address; City; State; Zip Code
Bluebonnet Station
Austin, TX 78758

185.00

Purpose of payment (See instructions regarding type of information required.)

Stamps (for fundraiser mailing)

-- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name Office sought Office held

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F: 2
2 FILER NAME David A. Escamilla		3 ACCOUNT # (Ethics Commission filers)
4 Date 7/09/03	5 Payee name Accu Graphics	7 Amount (\$) 61.00
6 Payee address; City; State; Zip Code 7801 N. Lamar Blvd Austin, TX 78752		
8 Purpose of payment (See instructions regarding type of information required.) Sponsor sign for fundraiser w/ printing	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held	
Date: 7/02/03	Payee name Travis County Bar Association	Amount (\$) 125.00
Payee address; City; State; Zip Code 816 Congress Ave, Suite 700 Austin, TX 78701		
Purpose of payment (See instructions regarding type of information required.) Mailing labels for fundraiser		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date: 7/11/03	Payee name Kinko's	Amount (\$) 5.00
Payee address; City; State; Zip Code 9222 Burnet Road Austin, TX 78758		
Purpose of payment (See instructions regarding type of information required.) Copies		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date	Payee name	Amount (\$)
Payee address; City; State; Zip Code		
Purpose of payment (See instructions regarding type of information required.)		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held

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