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

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

5455

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: 15

OFFICE USE ONLY

Date Received

Date Hand-delivered or Date Postmarked

FILED FOR RECORD
2003 JUL 15 PM 4:55
DANA DEBEAUVOIR
COUNTY CLERK
TRAVIS COUNTY TEXAS

Receipt # | Amount

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

TITLE: Judge | FIRST: SAMUEL | MI: T.
NICKNAME | LAST: BISCOE | SUFFIX

4 CANDIDATE / OFFICEHOLDER ADDRESS

☐ Change of Address

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

5 CAMPAIGN TREASURER NAME

TITLE | FIRST: Eugene | MI
NICKNAME | LAST: BAILY | SUFFIX

6 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE): 3212 Northeast Dr. | APT / SUITE #: | CITY: Austin, | STATE: TX | ZIP CODE: 78723

7 CAMPAIGN TREASURER PHONE

AREA CODE: (512) | PHONE NUMBER: 926-0427 | EXTENSION

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: 1/16/03 THROUGH Month Day Year: 7/15/03

10 ELECTION

ELECTION DATE Month Day Year: N/A

ELECTION TYPE: ☐ Primary ☐ Runoff ☐ General ☐ Special

11 OFFICE

OFFICE HELD (if any): Travis County Judge

12 OFFICE SOUGHT (if known)

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: 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

14 C/OH NAME: Samuel T. Biscoe

15 ACCOUNT # (Ethics Commission files): 2/15

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
- ☐ GENERAL
- ☐ SPECIFIC

COMMITTEE NAME: N/A

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)	$ 11,200
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$ —
	4. **TOTAL POLITICAL EXPENDITURES**	$ 5340.25
OUTSTANDING LOAN TOTALS	5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 0

19 AFFIDAVIT

Brenda Sue Pennie
Notary Public, State of Texas
My Commission Expires
MARCH 23, 2005

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 15 day of July, 2003, to certify which, witness my hand and seal of office.

Brenda Sue Pennie — Signature of officer administering oath
BRENDA SUE PENNIE — Printed name of officer administering oath
Notary Public — 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: (6 pages) 3/18

2 FILER NAME: Samuel T. Biscoe

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3/25/03	Ambrust + Brown 100 Congress Ave Suite 1300 Austin, TX 78701-2744	$1000.00	

9 Principal occupation (Optional): Attorney

10 Employer (Optional):

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/18/03	Mark F. Schultz 1700 Rio Grande 4th fl Austin, TX 78701	$1000.00	

Principal occupation (Optional):

Employer (Optional):

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/19/03	Winstead, Sechrest + Minick PAC 5400 Renaissance Tower 1201 Elm St. Dallas, TX 75270	$500.00	

Principal occupation (Optional): Attorney

Employer (Optional):

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/19/03	Laura Anderson Beuerlein 2605 Woodmont Ave. Austin, TX 78705	$500.00	

Principal occupation (Optional):

Employer (Optional):

Date	Full name of contributor ☐ out of state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/20/03	Joseph Lynn Nabors 6034 W. Courtyard Dr. Suite 100-B Austin, TX 78730-5870	$500.00	

Principal occupation (Optional): Consultant

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.

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

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: 4/15

2 FILER NAME: Samuel T. Biscoe

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#: ____)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3/12/03	Turner, Collie + Braden PAC P.O. Box 130089 Houston, TX 77219	$500.00	

9 Principal occupation (Optional): Engineer
10 Employer (Optional):

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/14/03	Bill Bingham McGinnis, Lochridge + Kilgore 919 Congress Ave. Suite 1100 Austin, TX 78701	$500.00	

Principal occupation (Optional): Attorney
Employer (Optional):

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/18/03	Rick Walker 905 E. 7th St. Austin, TX 78702	$500.00	

Principal occupation (Optional):
Employer (Optional):

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/19/03	Clif Davis 11626 Arroyo Blanco Dr. Austin, TX 78748	$250.00	

Principal occupation (Optional):
Employer (Optional):

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/19/03	Stephen Sanders 5804 Buckpasser Cv. Austin, TX 78746	$250.00	

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: 5/15

2 FILER NAME: Samuel T. Biscoe

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3/19/03	Paul Bury 3345 Bee Cave Rd #200 Austin, TX 78746	$500.00	
Principal occupation (Optional): Engineer	Employer (Optional):		
Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/19/03	George Prall 1421 Webb Branch Pkwy Suite 104 Austin, TX 78660	$250.00	
Principal occupation (Optional): Engineer	Employer (Optional):		
Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/18/03	Leslie W. Pitman 1515 S. Capital of TX Hwy Westlake Plaza, Suite 302 Austin, TX 78746	$250.00	
Principal occupation (Optional): Engineer	Employer (Optional):		
Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/19/03	David Roche 7421 Waldon Dr. Austin, TX 78750-8252	$400.00	
Principal occupation (Optional):	Employer (Optional):		
Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/19/03	Jeffrey Newberg 3603 Tekoa Cove Austin, TX 78746	$200.00	
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: 6/15

2 FILER NAME: Samuel T. Biscoe

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State, Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3/19/03	Christopher T. Ellis 2013 Rue De St. Tropez Austin, Tx 78746	$200.00	

9 Principal occupation (Optional)

10 Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/19/03	Gay Erwin #3 Jeffrey Cove Austin, Tx 78746	$200.00	

Principal occupation (Optional)

Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/19/03	DANIEL A. Vaillant 3001 NIAGARA Austin, Tx 78733	$100.00	

Principal occupation (Optional)

Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/19/03	Anthony Skaleesh 331 Mulberry Creek Dr Austin, Tx 78732	$100.00	

Principal occupation (Optional): Engineer

Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/18/03	Ben F. Vaughan III P.O. Box 2233 Austin, Tx. 78768-2233	$200.00	

Principal occupation (Optional): Attorney

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: 7/15

2 FILER NAME: Samuel T. Biscoe

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3/18/03	Terry Bray P. O. Box 98 515 Congress Ave. Suite 2300	$100.00	

9 Principal occupation (Optional): Attorney

10 Employer (Optional):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/18/03	R. Alan Haywood 3604 Highland View Austin, TX 78731	$100.00	

Principal occupation (Optional): Attorney

Employer (Optional):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/18/03	David Hartman 1135 Barton Hills Dr. Apt 308 Austin, TX 78704-1895	$50.00	

Principal occupation (Optional):

Employer (Optional):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/19/03	Kirk Rudy 2111 Highgrove Ter. Austin, TX 78703	$400.00	

Principal occupation (Optional):

Employer (Optional):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/17/03	Graves, Dougherty + Hearon Moody P. O. Box 98 Austin, TX 78767	$500.00	

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: 8/15

2 FILER NAME: Samuel T. Biscoe

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3/17/03	A Bryce 1207 W. 5th St. Suite 200 Austin, TX 78703	$150.00	

9 Principal occupation (Optional) | 10 Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/20/03	Vinson & Elkins Texas PAC 2300 First City Tower Houston, TX 77002-6760	$1000.00	

Principal occupation (Optional): Attorneys | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
7/2/03	Rick Walden 905 E. 7th St. Austin, TX 78702	$1000.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/19/03	Martin & Salinas Public Affairs 3345 Bee Cave Rd 78746	$1523.00	Expense for Fundraiser

Principal occupation (Optional): Consultants | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)

Principal occupation (Optional) | Employer (Optional)

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: (7 pages) 9/15

2 FILER NAME: Samuel T. Biscoe

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
1/28/03	United Way Capital Area 2000 E. MLK Jr. Blvd. Austin, TX 78702	$500.00

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

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 ($)
1/23/03	Alicia Perez P. O. Box 1748 Austin, TX 78767	$40.95

Purpose of payment (See instructions regarding type of information required.): Lunch Expense for County Retreat

•• 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 ($)
2/23/03	Brenda Pennie 6503 Sandshoff Austin, TX 78724	29.94

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

•• 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 ($)
4/3/03	Worley Printing 3217 N. I.H. 35 Austin, TX 78722	$174.45

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

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 10/15

2 FILER NAME: Samuel T. Biscoe

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
2/24/03	Huston Tillotson College Alumni Assoc. 900 Chicon Austin, Tx 78702	$75.00

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

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 ($)
2/24/03	Capital City Argus Newspaper P. O. Box 1780 Austin, Tx 78721	$200.00

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

-- 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 ($)
3/7/03	Lynn Harper P. O. Box 1948 Austin, Tx 78767	$75.00

Purpose of payment (See instructions regarding type of information required.): Food Expense for Josie Zavala's Retirement Recept.

-- 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 ($)
3/22/03	Mt Zion Baptist Church 2938 E. 13th Austin, Tx 78702	$100.00

Purpose of payment (See instructions regarding type of information required.): Donation / Rev. Clark Anniversary

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 11/15

2 FILER NAME: Samuel T. Biscoe

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
3/26/03	Jodd, Education & Support For / April Danielle Spraijer 13415 Buckthorne Cr. Dallas, TX 75243	$50.00

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

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 ($)
3/24/03	Don Smith P. O. Box 8499 Austin, TX 78713	$2000.00

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

** 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 ($)
3/27/03	Rick Blakely 3305 E. 47th St. Austin, TX 78702	$50.00

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

** 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 ($)
3/28/03	James Johnson c/o Elkan 7237 U.S. Hwy 290 E Austin, TX 78723	$50.00

Purpose of payment (See instructions regarding type of information required.): Donation / Tickets

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

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Revised 04/04/2000

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 12/15

2 FILER NAME: Samuel T. Biscoe

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
4/3/03	Travis County Democratic Party 4201 S. Congress Austin, TX 78745	$ 743.91

8 Purpose of payment (See instructions regarding type of information required.): Phone Service Expense @ Airport Office

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 ($)
4/5/03	U. V. Christian 1704 E. 12th Austin, TX 78702	$ 130.00

Purpose of payment (See instructions regarding type of information required.): Overton Scholarship Program

•• 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 ($)
4/24/03	Texas Assoc. of Elks c/o Helen Clark 7237 Hwy 290 E. Austin, TX 78723	$ 50.00

Purpose of payment (See instructions regarding type of information required.): Donation - Sickle Cell

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name: Fundraiser | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4/11/03	David Armbrust 100 Congress Ave Suite 1300 Austin, TX 78701	$ 60.00

Purpose of payment (See instructions regarding type of information required.): Donation / Golf Tournament

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

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Revised 04/04/2000

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 13/15

2 FILER NAME: Samuel T. Biscoe

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
4/25/03	Samuel T. Biscoe 6411 Bridgewater Dr. Austin, Tx 78723	$100.00

8 Purpose of payment (See instructions regarding type of information required.): Reimbursement of travel + milage Expense

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 ($)
4/28/03	Com. Margaret Gomez P.O. Box 1748 Austin, Tx 78767	$25.00

Purpose of payment (See instructions regarding type of information required.): Cinco de Mayo Sponsorship

** 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 ($)
5/2/03	Diana's Flower Shop 2614 E. 7th St. Austin, Tx 78702	$279.29

Purpose of payment (See instructions regarding type of information required.): Flowers for Funerals Billy Reed, Donald Moody, Roger Bailey, Jesse Holdamer

** 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 ($)
5/16/03	Samuel T. Biscoe 6411 Bridgewater Austin, Tx 78723	$100.00

Purpose of payment (See instructions regarding type of information required.): Misc. Expense Re-imbursement

** 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: 14/15

2 FILER NAME: Samuel T. Biscoe

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
5/23/03	Lawrence Beattie 5808 Woodrow Austin, TX 78756	$50.00

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

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 ($)
6/12/03	Austin - Tillotson College 900 Chicon Austin, TX 78702	$100.00

Purpose of payment (See instructions regarding type of information required.): Housing Exp. for The marching Band / Juneteenth Parade

** 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 ($)
6/14/03	Alpha Education Foundation Scholarship Fund P. O. Box 1230 Austin, TX 78713	60.00

Purpose of payment (See instructions regarding type of information required.): Scholarship Fund - Donation

** 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 ($)
6/10/03	Sam Biscoe Special Projects P. O. Box 1748 Austin, TX 78767	$35.00

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

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

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 15/15

2 FILER NAME: Samuel T. Biscoe

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
6/20/03	HEB 7112 Bee Bluestein Austin, Tx 78723	$122.71

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

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 ($)
6/27/03	Samuel T. Biscoe 6411 Bridgewater Dr. Austin, Tx 78713-8459	$100.00

Purpose of payment (See instructions regarding type of information required.): Misc. Expense Re-imbursement

•• 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 ($)
7/2/03	Brandon Whetstone 6211 Harwin Ln Austin, Tx 78745	$100.00

Purpose of payment (See instructions regarding type of information required.): Gift / for Youth Intern

•• 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 ($)
7/11/03	D.W. Smith P.O. Box 8499 Austin, Tx	$37.00

Purpose of payment (See instructions regarding type of information required.): Re-imbursement / Postage

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

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