

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

5506

FORM C/OH COVER SHEET PG 1

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| The C/OH INSTRUCTION GUIDE explains how to complete this form. | | 1 ACCOUNT # (Ethics Commission filers) 00000000 | 2 Total pages this report: 1/4 |
| 3 CANDIDATE / OFFICEHOLDER NAME | TITLE | FIRST MI Thornton | OFFICE USE ONLY Date Received Date Hand-Delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged FILED FOR RECORD 2004 JAN 13 AM 11:22 COUNTY CLERK TRAVIS COUNTY TEXAS |
| | NICKNAME | LAST SUFFIX Keel | |
| 4 CANDIDATE / OFFICEHOLDER ADDRESS | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 23812 Tres Coronas Spicewood TX 78669 | <input type="checkbox"/> Change of Address | |
| 5 CAMPAIGN TREASURER NAME | TITLE | FIRST MI Donna L. | |
| | NICKNAME | LAST SUFFIX Keel | |
| 6 CAMPAIGN TREASURER ADDRESS | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 23812 Tres Coronas Spicewood TX 78669 | (Residence or business) | |
| 7 CAMPAIGN TREASURER PHONE | AREA CODE PHONE NUMBER EXTENSION (512) 264-3467 | | |
| 8 REPORT TYPE | <input checked="" 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 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 12/12/2003 | THROUGH Month Day Year 12/31/2003 | |
| 10 ELECTION | ELECTION DATE Month Day Year 03/09/2004 | ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special | |
| | 11 OFFICE OFFICE HELD (if any) | 12 OFFICE SOUGHT (if known) Other - Travis County Constable 3 | |
| 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 | | |
| <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
Thornton Keel

15 ACCOUNT # (Ethics Commission filers)
00000000

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

17 NO REPORTABLE ACTIVITY

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

18 CONTRIBUTION TOTALS

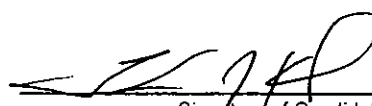
| | |
|---|------------|
| 1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED | \$ 0.00 |
| 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ 6000.00 |
| 3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED | \$ 50.84 |
| 4. TOTAL POLITICAL EXPENDITURES | \$ 1149.24 |
| 5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 0.00 |

EXPENDITURE TOTALS

OUTSTANDING LOAN TOTALS

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.

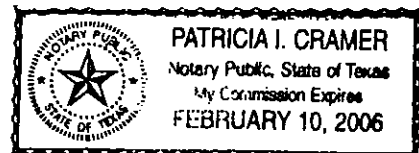

Signature of Candidate or Officeholder

State of Texas
County Of Travis

Sworn to and subscribed before me this 13th day of January, 2004



Notary Public



POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1 (FOR FORMS C/OH & SPAC)

| | | | |
|---|--|--|---|
| The INSTRUCTION GUIDE explains how to complete this form. | | 1 Total pages this report: 3/4 | |
| 2 FILER NAME Thornton Keel | | 3 ACCOUNT # (Ethics Commission files) 00000000 | |
| 4 Date 12/26/2003 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Mr. and Mrs. Thomas M. Keel 6 Contributor address; City; State; Zip Code 808 Brooks Hollow Rd Austin TX 78734-3409 | 7 Amount of contribution (\$) 5000.00 | 8 In-kind contribution description (if applicable) |
| 9 Principal occupation (Optional) | | 10 Employer (Optional) | |
| Date 12/23/2003 | Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Terry Keel Campaign Contributor address; City; State; Zip Code 1108 Lavaca St Ste 400 Austin TX 78701-2125 | Amount of contribution (\$) 1000.00 | In-kind contribution description (if applicable) |
| Principal occupation (Optional) | | Employer (Optional) | |
| | | | |

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
4/4

2 FILER NAME
Thornton Keel

3 ACCOUNT # (Ethics Commission filers)
00000000

| | | |
|-----------------------------|---|-------------------------------|
| 4 Date 12/29/2003 | 5 Payee name Nelda Wells Spears 6 Payee address; City; State; Zip Code PO Box 1748 Austin TX 78767-1748 | 7 Amount (\$) 74.40 |
|-----------------------------|---|-------------------------------|

| | |
|---|---|
| 8 Purpose of expenditure (See instructions regarding type of information required.) Lists | 9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held |
|---|---|

| | | |
|--------------------|---|----------------------|
| Date 12/29/2003 | Payee name Nelda Wells Spears Payee address; City; State; Zip Code PO Box 1748 Austin TX 78767-1748 | Amount (\$) 24.00 |
|--------------------|---|----------------------|

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|---|--|
| Purpose of expenditure (See instructions regarding type of information required.) Campaign materials | Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held |
|---|--|

| | | |
|--------------------|--|------------------------|
| Date 12/23/2003 | Payee name Travis County Republican Party Payee address; City; State; Zip Code 1300 W. Koenig Lane Austin TX 78756 | Amount (\$) 1000.00 |
|--------------------|--|------------------------|

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|---|--|
| Purpose of expenditure (See instructions regarding type of information required.) Filing fee | Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held |
|---|--|