

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

5523

FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.	1 ACCOUNT # (Ethics Commission filers) 00000000	2 Total pages this report: 1/15
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3 CANDIDATE / OFFICEHOLDER NAME	TITLE FIRST MI Joe	OFFICE USE ONLY
	NICKNAME LAST SUFFIX Martinez	

4 CANDIDATE / OFFICEHOLDER ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 11505 Juniper Ridge Dr. Austin TX 78759	Date Received JAN 15 AM 9:06 TRAVIS COUNTY TEXAS
		Date Hand-Delivered or Date Postmarked

5 CAMPAIGN TREASURER NAME	TITLE FIRST MI Thomas	Receipt #	Amount
	NICKNAME LAST SUFFIX Fulmer	Date Processed	
		Date Imaged	

6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 7515 Ladle Ln. Austin TX 78749
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7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 288-1201
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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 08/12/2003	THROUGH	Month Day Year 12/31/2003
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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
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11 OFFICE	OFFICE HELD (if any)	12 OFFICE SOUGHT (if known) Other -- Travis County Sheriff
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13 DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS <input type="checkbox"/> additional pages	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

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME
Joe Martinez

15 ACCOUNT # (Ethics Commission files)
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

COMMITTEE NAME

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

\$ 0.00

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

\$ 5648.00

EXPENDITURE TOTALS

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

\$ 0.00

4. TOTAL POLITICAL EXPENDITURES

\$ 2314.74

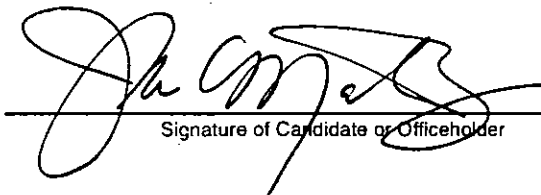
OUTSTANDING LOAN TOTALS

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

\$ 0.00

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

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: 3/15	
2 FILER NAME Joe Martinez		3 ACCOUNT # (Ethics Commission Files) 00000000	
4 Date 11/05/2003	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Cheryl Alexander 6 Contributor address; City; State; Zip Code 2002 Meadowridge #102 Austin TX 78704	7 Amount of contribution (\$) 100.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 11/19/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) John Arnold Contributor address; City; State; Zip Code 8312 Fathom Circle Apt. 105 Austin TX 78750	Amount of contribution (\$) 25.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 11/05/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Cynthia Beach Contributor address; City; State; Zip Code 2016 N. CR 122 Georgetown TX 78626	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 08/25/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Michael Belkin Contributor address; City; State; Zip Code P.O. Box 746 Yaphank NY 11980	Amount of contribution (\$) 200.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 11/11/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Michael Belkin Contributor address; City; State; Zip Code 5203 N. Cheyenne Dr. Beverly Hills FL 34465	Amount of contribution (\$) 200.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

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: 4/15	
2 FILER NAME Joe Martinez		3 ACCOUNT # (Ethics Commission #ers) 00000000	
4 Date 11/05/2003	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) David Berry 6 Contributor address; City; State; Zip Code 11509 Juniper Ridge Austin TX 78759	7 Amount of contribution (\$) 100.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 11/24/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Dana Bingham Contributor address; City; State; Zip Code 168 Exxon Rd. Willow City TX 78675	Amount of contribution (\$) 200.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 11/22/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Becki Carrinaga Contributor address; City; State; Zip Code 2203 Fair Oaks Dr. Austin TX 78745	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 09/25/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Cronk III Contributor address; City; State; Zip Code 197 Fox Chapel Rd. Henrietta NY 14467	Amount of contribution (\$) 200.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 11/22/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Ricky Davis Contributor address; City; State; Zip Code 1005 Oakwood Blvd. Round Rock TX 78681	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

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: 5/15	
2 FILER NAME Joe Martinez		3 ACCOUNT # (Ethics Commission #ers) 00000000	
4 Date 09/01/2003	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Maria Deleza	7 Amount of contribution (\$) 20.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 1900 Bienville Austin TX 78727			
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 12/31/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Gabriel Diab	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 8102 Mullen Dr. Austin TX 78757			
Principal occupation (Optional)		Employer (Optional)	
Date 09/09/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Willie Fabila III	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2101 W. Anderson Ln. #317 Austin TX 78757			
Principal occupation (Optional)		Employer (Optional)	
Date 11/09/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Bruce Fox	Amount of contribution (\$) 200.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 404 W. 13th St. Austin TX 78701			
Principal occupation (Optional)		Employer (Optional)	
Date 12/18/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Jesse Fraga	Amount of contribution (\$) 150.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 15832 Sambuca Cir. Austin TX 78728			
Principal occupation (Optional)		Employer (Optional)	

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: 6/15	
2 FILER NAME Joe Martinez		3 ACCOUNT # : Ethics Commission Merit 00000000	
4 Date 08/15/2003	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Thomas Fulmer	7 Amount of contribution (\$) 25.00	8 In-kind contribution description (if applicable) U.S. Post Office, key de - posit
6 Contributor address: City: State: Zip Code 7515 Ladle Ln. Austin TX 78749			
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 08/15/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Thomas Fulmer	Amount of contribution (\$) 63.00	In-kind contribution description (if applicable) U.S. Postal Box Rental
Contributor address: City: State: Zip Code 7515 Ladle Ln. Austin TX 78749			
Principal occupation (Optional)		Employer (Optional)	
Date 08/15/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Thomas Fulmer	Amount of contribution (\$) 25.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 7515 Ladle Ln. Austin TX 78749			
Principal occupation (Optional)		Employer (Optional)	
Date 11/22/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) H. Guerrero	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code Austin TX			
Principal occupation (Optional)		Employer (Optional)	
Date 09/20/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Howard Hall	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 9900 Winding Oaks Circle Austin TX 78750			
Principal occupation (Optional)		Employer (Optional)	

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: 7/15	
2 FILER NAME Joe Martinez		3 ACCOUNT # (Ethics Commission #ers) 00000000	
4 Date 11/05/2003	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Raymond Hernandez Jr. 6 Contributor address; City; State; Zip Code 11215 Whisper Falls San Antonio TX 78230	7 Amount of contribution (\$) 1000.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 11/08/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Craig Holland Contributor address; City; State; Zip Code 11606 Autumn Ridge Dr. Austin TX 78759	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 11/05/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Lester Johnson Contributor address; City; State; Zip Code 406 Woodbine Dr. Austin TX 78745	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 11/22/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Carmelo Macias Contributor address; City; State; Zip Code Austin TX	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 11/05/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Rodolfo Magallanes Contributor address; City; State; Zip Code 718 Shade Tree Drive Austin TX 78748	Amount of contribution (\$) 30.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

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: 8/15	
2 FILER NAME Joe Martinez		3 ACCOUNT # (Ethics Commission Mers) 00000000	
4 Date 11/05/2003	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Glenna Mills 6 Contributor address: City: State: Zip Code 1639 Payton Falls Austin TX 78754	7 Amount of contribution (\$) 50.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 11/05/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Leonor Murillo Contributor address: City: State: Zip Code 707 W. Monroe Austin TX 78704	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 11/05/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Sophia Nates Contributor address: City: State: Zip Code 7605 Ponomo Trail Austin TX 78749	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 12/04/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Rippy,Whitlow,Ranc & Hines,LLP Contributor address: City: State: Zip Code 107 Nueces St. Austin TX 78701	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 11/20/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Steven Sawyer Contributor address: City: State: Zip Code 6500 Danwood Dr. Austin TX 78759	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

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: 9/15	
2 FILER NAME Joe Martinez		3 ACCOUNT # (Ethics Commission #ers) 00000000	
4 Date 09/02/2003	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Susan Snyder	7 Amount of contribution (\$) 110.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code RR1 New Richmond IN 47967			
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 08/24/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Robert Underwood	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 11502 Juniper Ridge Austin TX 78759			
Principal occupation (Optional)		Employer (Optional)	
Date 11/05/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Amelia Vega	Amount of contribution (\$) 25.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 409 Lightsey Road Austin TX 78704			
Principal occupation (Optional)		Employer (Optional)	
Date 11/22/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Amelia Vega	Amount of contribution (\$) 25.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 409 Lightsey Rd. Austin TX 78704			
Principal occupation (Optional)		Employer (Optional)	
Date 11/05/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Charles Villasenor II	Amount of contribution (\$) 200.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2606 Jefferson St. Austin TX 78703			
Principal occupation (Optional)		Employer (Optional)	

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: 10/15	
2 FILER NAME Joe Martinez		3 ACCOUNT # (Ethics Commission #)ers) 00000000	
4 Date 08/18/2003	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Marshall Vogt 6 Contributor address: City: State: Zip Code Austin TX	7 Amount of contribution (\$) 100.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 09/13/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) John Volkner Contributor address: City: State: Zip Code 11507 Juniper Ridge Dr. Austin TX 78759	Amount of contribution (\$) 200.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 11/20/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Kathleen Watkins Contributor address: City: State: Zip Code 7506 Crossbow Dr. Austin TX 78731	Amount of contribution (\$) 100.00	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: 11/15
2 FILER NAME Joe Martinez		3 ACCOUNT # (Ethics Commission filers) 00000000
4 Date 10/02/2003	5 Payee name Aztec Marking Company <hr/> 6 Payee address; City; State; Zip Code Austin TX	7 Amount (\$) 190.37
8 Purpose of expenditure (See instructions regarding type of information required.) Bumper Stickers	9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held	
Date 08/28/2003	Payee name Bank of America <hr/> Payee address; City; State; Zip Code P.O. Box 2518 Houston TX 77252	Amount (\$) 14.00
Purpose of expenditure (See instructions regarding type of information required.) Check order	Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held	
Date 10/31/2003	Payee name Jan Galbraith <hr/> Payee address; City; State; Zip Code Austin TX	Amount (\$) 25.00
Purpose of expenditure (See instructions regarding type of information required.) SREC S.D. 14	Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held	
Date 12/30/2003	Payee name Kwik Kopy <hr/> Payee address; City; State; Zip Code Austin TX	Amount (\$) 52.28
Purpose of expenditure (See instructions regarding type of information required.) Campaign Handouts	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: 12/15
2 FILER NAME Joe Martinez		3 ACCOUNT # (Ethics Commission #ers) 00000000
4 Date 11/05/2003	5 Payee name Mariachi Estrella 6 Payee address; City: State: Zip Code P.O. Box 151222 Austin TX 78715	7 Amount (S) 200.00
8 Purpose of expenditure (See instructions regarding type of information required.) Entertainment at kickoff event		9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 12/05/2003	Payee name Travis County Republican Party Payee address; City: State: Zip Code Austin TX	Amount (S) 1250.00
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

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 13/15
2 FILER NAME Joe Martinez		3 ACCOUNT # (Ethics Commission Sigs) 00000000
4 Date 10/30/2003	5 Payee name Aztec Marking Company <hr/> 6 Payee address; City: State: Zip Code Austin TX 7 Purpose of expenditure (See instructions regarding type of information required.) Bumper Stickers	8 Amount (\$) 260.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 12/16/2003	Payee name Guadalajara Bar and Restaurant <hr/> Payee address; City: State: Zip Code 2303 RR 620 Suite 190 Lakeway TX 78734 Purpose of expenditure (See instructions regarding type of information required.) Political meeting and dinner	Amount (\$) 14.51 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 12/26/2003	Payee name Hallmark Creations <hr/> Payee address; City: State: Zip Code 9828 Great Hills Trail Austin TX Purpose of expenditure (See instructions regarding type of information required.) American Flag Stickers	Amount (\$) 3.46 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 10/19/2003	Payee name Kinko's <hr/> Payee address; City: State: Zip Code 9222 Burnet Rd. Ste. 101 Austin TX 78758 Purpose of expenditure (See instructions regarding type of information required.) Paper,cd duplication	Amount (\$) 10.71 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 10/20/2003	Payee name Kinko's <hr/> Payee address; City: State: Zip Code 9222 Burnet Rd. Ste. 101 Austin TX 78758 Purpose of expenditure (See instructions regarding type of information required.) Paper,cd duplication	Amount (\$) 24.83 <input checked="" type="checkbox"/> Reimbursement from political contributions intended

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 14/15
2 FILER NAME Joe Martinez		3 ACCOUNT # (Ethics Commission files) 00000000
4 Date 10/22/2003	5 Payee name Kwik Kopy 6 Payee address; City; State; Zip Code Austin TX	8 Amount (\$) 112.58 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
	7 Purpose of expenditure (See instructions regarding type of information required.) Business cards,graphics	
Date 12/05/2003	Payee name Kwik Kopy Payee address; City; State; Zip Code Austin TX	Amount (\$) 63.87 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
	Purpose of expenditure (See instructions regarding type of information required.) Business Cards	
Date 10/25/2003	Payee name Office Depot Payee address; City; State; Zip Code 4501 West Braker Lane Austin TX 78759	Amount (\$) 32.46 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
	Purpose of expenditure (See instructions regarding type of information required.) Copy services	
Date 10/30/2003	Payee name Office Depot Payee address; City; State; Zip Code 4501 West Braker Lane Austin TX 78759	Amount (\$) 16.97 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
	Purpose of expenditure (See instructions regarding type of information required.) Markers,badges	
Date 11/17/2003	Payee name Office Depot Payee address; City; State; Zip Code 4501 West Braker Lane Austin TX 78759	Amount (\$) 21.65 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
	Purpose of expenditure (See instructions regarding type of information required.) Colored paper for flyers	

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 15/15
2 FILER NAME Joe Martinez		3 ACCOUNT # (Ethics Commission #ers) 00000000
4 Date 11/30/2003	5 Payee name Office Depot 6 Payee address; City; State; Zip Code 4501 West Braker Lane Austin TX 78759	8 Amount (\$) 10.61
7 Purpose of expenditure (See instructions regarding type of information required.) Clipboards,paper		<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 10/16/2003	Payee name Ryan's Steakhouse Payee address; City; State; Zip Code 1813 Parmer Lane West Austin TX 78727	Amount (\$) 11.44
Purpose of expenditure (See instructions regarding type of information required.) Dinner meeting		<input checked="" type="checkbox"/> Reimbursement from political contributions intended