

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

5786

**FORM C/OH
COVER SHEET PG 1**

<p>The C/OH INSTRUCTION GUIDE explains how to complete this form.</p>		<p>1 ACCOUNT # (Ethics Commission filers)</p>	<p>2 Total pages filed: 15</p>
<p>3 CANDIDATE / OFFICEHOLDER NAME</p>	<p>MS / MRS / MR FIRST MI Gary Duane NICKNAME LAST SUFFIX McNeill</p>	<p>OFFICE USE ONLY</p> <p>Date Received 2004 JUN 15 2M 9:4</p> <p>Date hand-delivered or Date Postmarked</p> <p>Receipt # Amount</p> <p>Date Processed</p> <p>Date Imaged</p>	
<p>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address</p>	<p>ADDRESS / PO BOX: APT / SUITE # CITY: STATE: ZIP CODE PMB #153 Suite P 4404 W. Wm. Cannon Drive Austin, TX 78749</p>		
<p>5 CANDIDATE / OFFICEHOLDER PHONE</p>	<p>AREA CODE PHONE NUMBER EXTENSION (512) 288-8212</p>		
<p>6 CAMPAIGN TREASURER NAME</p>	<p>MS / MRS / MR FIRST MI Elizabeth NICKNAME LAST SUFFIX Lidi Wozniak</p>		
<p>7 CAMPAIGN TREASURER ADDRESS (Residence or business)</p>	<p>STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE # CITY: STATE: ZIP CODE 7423 Whistestop Drive Austin TX 78749</p>		
<p>8 CAMPAIGN TREASURER PHONE</p>	<p>AREA CODE PHONE NUMBER EXTENSION (512) 288-8212</p>		
<p>9 REPORT TYPE</p>	<p><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)</p>		
<p>10 PERIOD COVERED</p>	<p>Month Day Year THROUGH Month Day Year 4 / 5 / 04 7 / 15 / 04</p>		
<p>11 ELECTION</p>	<p>ELECTION DATE ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special 11 / 02 / 04</p>		
<p>12 OFFICE</p>	<p>OFFICE HELD (if any)</p>	<p>13 OFFICE SOUGHT (if known) Travis County Sheriff</p>	
<p>14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS <input type="checkbox"/> additional pages</p>	<p>-- 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. --</p> <p>Name N/A</p> <p>Address / PO Box: Apt. / Suite #. City. State. Zip Code</p>		

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

15 C/OH NAME

Duane McNeill

16 ACCOUNT # (Ethics Commission files)

17 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. **

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

18 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ _____
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2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 28,540.00
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EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ _____
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4. TOTAL POLITICAL EXPENDITURES	\$ 14,067.41
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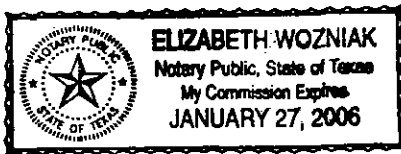
CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 31,080.25
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OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ _____
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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]

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said G. Duane McNeill this the 14th day of July, 2004, to certify which, witness my hand and seal of office.

[Signature]
Signature of officer administering oath

Elizabeth Wozniak
Printed name of officer administering oath

Treasurer
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule A: 4	
2 FILER NAME Duane McNeill		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/5/04	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pamela Van Sicklen	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 5012 McIntyre Cirde Austin, TX 78734-1818			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/5/04	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mike + Lindsay Graham	Amount of contribution (\$) \$20.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 11915 Stonehollow Dr. #7350 Austin, TX 78758			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/13/04	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bob G. Bailey	Amount of contribution (\$) \$20.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3215 Tarry Hollow Austin, TX 78703			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/27/04	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jim + Raylene Fealy	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4605 Chesterfield Place Jamestown, NC 27282			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/9/04	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert W. + M. Gail Hughes Living Trust	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 600 Congress Ave., Suite 200 Austin, TX 78701			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
<p>ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule A: 4	
2 FILER NAME Duane McNeill		3 ACCOUNT # (Ethics Commission filers)	
4 Date 5/12/04	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Lake Travis Republican PAC 6 Contributor address; City: State: Zip Code 109 Morning Cloud Rd Austin TX 78734	7 Amount of contribution (\$) \$1,000.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 5/19/04	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Wuthipong + Lisa Tantaksinanukij Contributor address; City: State: Zip Code 1504 Water Street Bastrop, TX 78602	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/20/04	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Ghassan + Jacko Najjar Contributor address; City: State: Zip Code 2904 Mill Reef Cove Austin, TX 78746-1800	Amount of contribution (\$) \$5,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/20/04	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Salim G. Salem Contributor address; City: State: Zip Code 2303 Falcon Hill Drive Austin, TX 78745	Amount of contribution (\$) \$5,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/13/04	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Keel Systems Contributor address; City: State: Zip Code 1108 Lavaca Street, Ste. 400 Austin, TX 78701	Amount of contribution (\$) \$12,500.00	In-kind contribution description (if applicable) Political consulting, walk lists, direct mail targeting, brochure content layouts
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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 A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:
4

2 FILER NAME
Duane McNeill

3 ACCOUNT # (Ethics Commission filers)

4 Date
5/24/04

5 Full name of contributor out-of-state PAC (ID#: _____)
Ty + Shelly Rvnyan

7 Amount of contribution (\$)
\$1,000.00

8 In-kind contribution description (if applicable)

6 Contributor address: City: State: Zip Code
3500 Rip Ford Drive
Austin, TX 78732-2217

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#: _____)
Benito M. Vega

Amount of contribution (\$)
\$100.00

In-kind contribution description (if applicable)

5/23/04

Contributor address: City: State: Zip Code
706 W. Live Oak St.
Austin, TX 78704

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#: _____)
Austin Police Association - P.A.C.

Amount of contribution (\$)
\$1500.00

In-kind contribution description (if applicable)

6/3/04

Contributor address: City: State: Zip Code
400 W. 14TH Street
Austin, TX 78701

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#: _____)
William L. Hanks

Amount of contribution (\$)
\$100.00

In-kind contribution description (if applicable)

6/3/04

Contributor address: City: State: Zip Code
503 Pine Siskin
Buda, TX 78610-2658

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Amount of contribution (\$)
\$250.00

In-kind contribution description (if applicable)

6/17/04

Contributor address: City: State: Zip Code
5102 Back Trail
Austin, TX 78731

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED
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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

4

2 FILER NAME

Duane McNeill

3 ACCOUNT # (Ethics Commission filers)

4 Date

6/11/04

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

Austin Republican Women

7 Amount of contribution (\$)

\$500.00

8 In-kind contribution description (if applicable)

6 Contributor address: City: State: Zip Code

2327 Cypress Pt. E.
Austin, TX 78746-7224

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

6/23/04

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

Robert Honts

Amount of contribution (\$)

\$250.00

In-kind contribution description (if applicable)

Contributor address: City: State: Zip Code

1402 San Antonio Suite 102
Austin, TX 78701

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

7/8/04

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

Commissioner Gerald Daugherty

Amount of contribution (\$)

\$250.00

In-kind contribution description (if applicable)

Contributor address: City: State: Zip Code

1403 Club Ridge Cove
Austin, TX 78735

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

7/13/04

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

Lake Travis Republican PAC

Amount of contribution (\$)

\$250.00

In-kind contribution description (if applicable)

Contributor address: City: State: Zip Code

109 Morning Cloud Rd.
Austin, TX 78734

Precinct walk lists - 25

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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 / Job title (See Instructions)

Employer (See Instructions)

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

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule G:

9

2 FILER NAME

Dvane McNeill

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name 6 Payee address: City, State, Zip Code	8 Amount (\$)
4/5/04	Shell 3310 Northland Drive Austin TX	\$ 23.00
	7 Purpose of expenditure (See instructions regarding type of information required.) Gasoline for neighborhood campaigning	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
4/6/04	Wells Branch Shell 14524 IH 35 South Austin TX 78728	\$ 25.00
	Purpose of expenditure (See instructions regarding type of information required.) Gasoline for neighborhood campaigning	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
4/6/04	U.S. Postal Service Austin, TX 78710-9651	\$ 2,469.27
	Purpose of expenditure (See instructions regarding type of information required.) Postage for mailers	<input type="checkbox"/> Reimbursement from political contributions intended
4/6/04	Classic Typesetting P.O. Box 90067 Austin TX 78709-0067	\$ 1,643.79
	Purpose of expenditure (See instructions regarding type of information required.) Mailers + graphic services (#1)	<input type="checkbox"/> Reimbursement from political contributions intended
4/6/04	Classic Typesetting P.O. Box 90067 Austin TX 78709-0067	\$ 1,775.44
	Purpose of expenditure (See instructions regarding type of information required.) Mailers + graphic services (#2)	<input type="checkbox"/> Reimbursement from political contributions intended

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule G:

9

2 FILER NAME

Duane McNeill

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name 6 Payee address: City: State: Zip Code	8 Amount (\$)
4/7/04	Pflugerville HEB Gas 291 N. FM 685 Pflugerville, TX 78660 7 Purpose of expenditure (See instructions regarding type of information required.) Gasoline for neighborhood campaigning	\$ 15.80 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
4/8/04	Kinko's 5601 Brodie Lane Sunset Valley, TX 78745 Purpose of expenditure (See instructions regarding type of information required.) Fliers	\$ 45.26 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
4/9/04	Kinko's 5601 Brodie Lane Sunset Valley, TX 78745 Purpose of expenditure (See instructions regarding type of information required.) Fliers	\$ 47.22 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
4/10/04	Kishan Food Stop-Shell 5630 N. Lamar Austin, TX 78751 Purpose of expenditure (See instructions regarding type of information required.) Gasoline for campaign vehicle	\$ 30.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
4/12/04	Diamond Shamrock 3423 W. Slaughter Lane Austin, TX Purpose of expenditure (See instructions regarding type of information required.) Gasoline for campaign vehicle	\$ 12.50 <input checked="" type="checkbox"/> Reimbursement from political contributions intended

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

**POLITICAL EXPENDITURES
MADE FROM PERSONAL FUNDS**

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule G: 9
2 FILER NAME Duane McNeill		3 ACCOUNT # (Ethics Commission filers)
4 Date 4/19/04	5 Payee name Texaco 6 Payee address: City: State: Zip Code 15900 W. FM 620 Austin, TX 7 Purpose of expenditure (See instructions regarding type of information required.) Gasoline for campaign vehicle	8 Amount (\$) \$ 14.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 4/19/04	Payee name Houston's Restaurant Payee address: City: State: Zip Code 2408 W. Anderson Lane Austin, TX 78757 Purpose of expenditure (See instructions regarding type of information required.) Business campaign dinner - meeting	Amount (\$) \$ 208.25 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 4/21/04	Payee name Hwy 71 Foodmart Payee address: City: State: Zip Code 9341 Hwy 71 Austin, TX Purpose of expenditure (See instructions regarding type of information required.) Gasoline for campaign vehicle	Amount (\$) \$ 30.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 4/27/04	Payee name Corner Store # 1307 Payee address: City: State: Zip Code 4600 William Cannon Austin, TX 78749 Purpose of expenditure (See instructions regarding type of information required.) Gasoline for campaign vehicle	Amount (\$) \$ 26.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 4/28/04	Payee name Dell Computer Payee address: City: State: Zip Code One Dell Way Round Rock, TX Purpose of expenditure (See instructions regarding type of information required.) Ink cartridges for campaign computer	Amount (\$) \$ 75.78 <input checked="" type="checkbox"/> Reimbursement from political contributions intended

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule G:

9

2 FILER NAME

Duane McNeill

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name 6 Payee address: City: State: Zip Code	8 Amount (\$)
4/29/04	Corner Store #1307 4600 William Cannon Austin, TX 78749 (none)	\$16.00
	7 Purpose of expenditure (See instructions regarding type of information required.) Gasoline for campaign vehicle	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
4/30/04	Texas Mailhouse, Inc. P.O. Box 141248 Austin, TX 78714	\$857.46
	Purpose of expenditure (See instructions regarding type of information required.) Data processing, inkjet address, prepare presort Mailer #1 - Run off	<input type="checkbox"/> Reimbursement from political contributions intended
5/10/04	Corner Store #1307 4600 William Cannon Austin TX 78749	\$12.50
	Purpose of expenditure (See instructions regarding type of information required.) Gasoline for campaign vehicle	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
5/21/04	Texas Mailhouse, Inc. P.O. Box 141248 Austin, TX 78714	\$857.95
	Purpose of expenditure (See instructions regarding type of information required.) Data processing, inkjet address, prepare presort Mailer #2 - Run off	<input type="checkbox"/> Reimbursement from political contributions intended
5/17/04	United States Postal Service Oakhill Station Austin, TX 78749-9998	\$37.00
	Purpose of expenditure (See instructions regarding type of information required.) Stamps	<input checked="" type="checkbox"/> Reimbursement from political contributions intended

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED.

**POLITICAL EXPENDITURES
MADE FROM PERSONAL FUNDS**

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule G: 9
2 FILER NAME Dwane McNeill		3 ACCOUNT # (Ethics Commission filers)
4 Date 5/19/04	5 Payee name 4D Printing Inc. 6 Payee address: City: State: Zip Code 4936 S. Congress Ave. #303 G Austin, TX 78745	8 Amount (\$) \$135.31
7 Purpose of expenditure (See instructions regarding type of information required.) 2 1/4 x 3 3/4 Revised campaign push cards		<input type="checkbox"/> Reimbursement from political contributions intended
Date 5/24/04	Payee name Corner Store #1307 Payee address: City: State: Zip Code 4600 William Cannon Austin, TX 78749	Amount (\$) \$34.50
Purpose of expenditure (See instructions regarding type of information required.) Gasoline for campaign vehicle		<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 5/29/04	Payee name Corner Store #1307 Payee address: City: State: Zip Code 4600 William Cannon Austin, TX 78749	Amount (\$) \$14.00
Purpose of expenditure (See instructions regarding type of information required.) Gasoline for campaign vehicle		<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 5/29/04	Payee name Kinko's Payee address: City: State: Zip Code 5601 Brodie Lane Sunset Valley, TX 78745	Amount (\$) \$91.57
Purpose of expenditure (See instructions regarding type of information required.) Fliers		<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 5/27/04	Payee name Corner Store #1307 Payee address: City: State: Zip Code 4600 William Cannon Austin, TX 78749	Amount (\$) \$15.50
Purpose of expenditure (See instructions regarding type of information required.) Gasoline for campaign vehicle		<input checked="" type="checkbox"/> Reimbursement from political contributions intended

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**POLITICAL EXPENDITURES
MADE FROM PERSONAL FUNDS**

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule G: 9
2 FILER NAME Duane McNeill		3 ACCOUNT # (Ethics Commission filers)
4 Date 6/7/04	5 Payee name Corner Store #1307 6 Payee address: City: State: Zip Code 4600 William Cannon Austin, TX 78749	8 Amount (\$) \$15.00
7 Purpose of expenditure (See instructions regarding type of information required.) Gasoline for campaign vehicle		<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 6/15/04	Payee name HEB Austin, #404 Payee address: City: State: Zip Code 12400 E. State Hwy 71 W Austin, TX	Amount (\$) \$14.50
Purpose of expenditure (See instructions regarding type of information required.) Gasoline for campaign vehicle		<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 6/17/04	Payee name Pak Mail - Oak Hill Payee address: City: State: Zip Code 4404 W. Wm Cannon Suite P Austin, TX 78749	Amount (\$) \$45.00
Purpose of expenditure (See instructions regarding type of information required.) Mailbox Rental		<input type="checkbox"/> Reimbursement from political contributions intended
Date 6/25/04	Payee name Ampro Productions Payee address: City: State: Zip Code P.O. Box 90157 Austin, TX 78709	Amount (\$) \$4,656.81
Purpose of expenditure (See instructions regarding type of information required.) Bumper stickers, yard signs, large campaign signs		<input type="checkbox"/> Reimbursement from political contributions intended
Date 6/28/04	Payee name Corner Store #1307 Payee address: City: State: Zip Code 4600 William Cannon Austin, TX 78749	Amount (\$) \$12.50
Purpose of expenditure (See instructions regarding type of information required.) Gasoline for campaign vehicle		<input checked="" type="checkbox"/> Reimbursement from political contributions intended

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule G: 9
2 FILER NAME Duane McNeill		3 ACCOUNT # (Ethics Commission filers)
4 Date 6/28/04	5 Payee name Office Depot	8 Amount (\$) \$9.71
	6 Payee address; City: State: Zip Code 5300 Mopac Expy South #101 Austin, TX 78749	
	7 Purpose of expenditure (See instructions regarding type of information required.) Envelopes	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 7/3/04	Payee name Corner Store #2095	Amount (\$) \$12.00
	Payee address; City: State: Zip Code 3423 W. Slaughter Lane Austin, TX	
	Purpose of expenditure (See instructions regarding type of information required.) Gasoline for campaign vehicle	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 7/3/04	Payee name Office Depot	Amount (\$) \$9.11
	Payee address; City: State: Zip Code 5300 Mopac Expy. South #101 Austin, TX 78749	
	Purpose of expenditure (See instructions regarding type of information required.) City map, 5.5 x 10 Pad (12 pk)	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 7/5/04	Payee name Kinko's	Amount (\$) \$200.03
	Payee address; City: State: Zip Code 5601 Brodie Lane Sunset Valley, TX 75745	
	Purpose of expenditure (See instructions regarding type of information required.) Campaign fliers for handouts	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 7/7/04	Payee name Office Depot	Amount (\$) \$7.27
	Payee address; City: State: Zip Code 5300 Mopac Expy South #101 Austin, TX 78749	
	Purpose of expenditure (See instructions regarding type of information required.) Campaign office materials	<input checked="" type="checkbox"/> Reimbursement from political contributions intended

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**POLITICAL EXPENDITURES
MADE FROM PERSONAL FUNDS**

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule G: 9
2 FILER NAME Duane McNeill		3 ACCOUNT # (Ethics Commission filers)
4 Date 7/8/04	5 Payee name Corner Store #1307 6 Payee address: City: State: Zip Code 4600 William Cannon Austin, TX 78749	8 Amount (\$) \$14.50 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
	7 Purpose of expenditure (See instructions regarding type of information required.) Gasoline for campaign vehicle	
Date 7/8/04	Payee name Home Depot Payee address: City: State: Zip Code 1200 Home Depot Blvd. Sunset Valley, TX 78745	Amount (\$) \$106.10 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
	Purpose of expenditure (See instructions regarding type of information required.) Materials for campaign signs	
Date 7/8/04	Payee name United States Postal Service Payee address: City: State: Zip Code Oakhill Station Austin, TX 78749-9998	Amount (\$) \$74.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
	Purpose of expenditure (See instructions regarding type of information required.) Stamps for campaign postage	
Date 7/9/04	Payee name Office Depot Payee address: City: State: Zip Code 5300 Mopac Expy., South #101 Austin, TX 78749	Amount (\$) \$15.70 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
	Purpose of expenditure (See instructions regarding type of information required.) Campaign office supplies	
Date 7/12/04	Payee name 4 D Printing Inc. Payee address: City: State: Zip Code 4930 S. Congress Ave. #303C Austin, TX 78745	Amount (\$) \$135.35 <input type="checkbox"/> Reimbursement from political contributions intended
	Purpose of expenditure (See instructions regarding type of information required.) Campaign business cards	

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

**POLITICAL EXPENDITURES
MADE FROM PERSONAL FUNDS**

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule G: 9
2 FILER NAME Duane McNeill		3 ACCOUNT # (Ethics Commission filers)
4 Date 7/12/04	5 Payee name Kinko's	8 Amount (\$) \$200.03
	6 Payee address: City: State: Zip Code 5601 Brodie Lane Sunset Valley, TX 78745	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
	7 Purpose of expenditure (See instructions regarding type of information required.) Fliers	
Date 7/12/04	Payee name Kinko's	Amount (\$) \$26.70
	Payee address: City: State: Zip Code 5601 Brodie Lane Sunset Valley, TX 78745	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
	Purpose of expenditure (See instructions regarding type of information required.) Fliers	
Date	Payee name	Amount (\$)
	Payee address: City: State: Zip Code	<input type="checkbox"/> Reimbursement from political contributions intended
	Purpose of expenditure (See instructions regarding type of information required.)	
Date	Payee name	Amount (\$)
	Payee address: City: State: Zip Code	<input type="checkbox"/> Reimbursement from political contributions intended
	Purpose of expenditure (See instructions regarding type of information required.)	
Date	Payee name	Amount (\$)
	Payee address: City: State: Zip Code	<input type="checkbox"/> Reimbursement from political contributions intended
	Purpose of expenditure (See instructions regarding type of information required.)	

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