

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

**SPECIFIC-PURPOSE COMMITTEE
CAMPAIGN FINANCE REPORT**

**FORM SPAC
COVER SHEET PG 1**

6383

The SPAC Instruction Guide explains how to complete this form. 1 ACCOUNT # (Ethics Commission Bars) 2 Total pages filed:

3 COMMITTEE NAME
GATEWAY LIBRARY SPAC

OFFICE USE ONLY
Date Received
Date Hand-Delivered or Date Postmarked
Receipt #
Date Processed
Date Imaged

4 COMMITTEE ADDRESS
 Change of Address
ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
**816 CONGRESS AVE.
SUITE 1200
AUSTIN, TX 78701**

5 CAMPAIGN TREASURER NAME
MS / MRS (MR) FIRST MI NICKNAME LAST SUFFIX
**WILLIAM B.
HILGERS**

6 CAMPAIGN TREASURER'S STREET ADDRESS (Residence or business)
STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
**816 CONGRESS AVE.
SUITE 1200
AUSTIN, TX 78701**

7 CAMPAIGN TREASURER'S MAILING ADDRESS
 Change of Address
STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
SAME

8 CAMPAIGN TREASURER PHONE
AREA CODE PHONE NUMBER EXTENSION
(512) 247-2351 OR 476-0005

9 REPORT TYPE
 January 15 30th day before election Exceeded \$500 limit
 July 15 6th day before election Dissolution (attach PAC-DR)
 Runoff 10th day after campaign treasurer termination

10 PERIOD COVERED
Month Day Year Month Day Year
10 / 21 / 06 THROUGH 10 / 26 / 06

11 ELECTION
ELECTION DATE ELECTION TYPE
Month Day Year Primary Runoff General Special
11 / 07 / 06

GO TO PAGE 2

FILED FOR RECORD
2006 OCT 26 PM 4:23
TRAVIS COUNTY CLERK
AUSTIN TEXAS

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

**SPECIFIC-PURPOSE COMMITTEE REPORT:
PURPOSE AND TOTALS**

**FORM SPAC
COVER SHEET PG 2**

12 COMMITTEE NAME

GATEWAY LIBRARY SPAC

ACCOUNT #
(Ethics Commission files)

13 COMMITTEE PURPOSE
(Attach lists on plain paper to complete this report if necessary.)

SUPPORT
(Candidate or Measure)

OPPOSE
(Candidate or Measure)

ASSIST
(Officeholder)

CANDIDATE

OFFICEHOLDER

MEASURE

CANDIDATE / OFFICEHOLDER NAME

OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)

BALLOT IDENTIFICATION / #

ELECTION DATE
Month Day Year

11 / 07 / 06

DESCRIPTION

CREATE EAST TRAVIS
GATEWAY LIBRARY DISTRICT

14 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ - 0 -

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

\$ 2500.00

EXPENDITURE TOTALS

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

\$ - 0 -

4. TOTAL POLITICAL EXPENDITURES

\$ 460.06

CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 7639.94

OUTSTANDING LOAN TOTALS

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

\$ - 0 -

15 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.

William A. Hilgers

Signature of campaign treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said WILLIAM B. HILGERS, this the 26th day of OCTOBER, 20 06, to certify which, witness my hand and seal of office.

Suzanne Newell

Signature of officer administering oath



Title of officer administering oath

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8508

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A:

2 FILER NAME 3 ACCOUNT # (Ethics Commission files)
WILLIAM B. HILGERS, TREASURER

4 Date 10/26/06	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: JOE R. LONG & TERESA L. LONG 6 Contributor address; City; State; Zip Code 2308 WOODLAWN BLVD. AUSTIN, TX 78703	7 Amount of contribution (\$) \$2500.00	8 In-kind contribution description (if applicable)
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(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions)

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
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(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
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(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
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(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
------	--	-----------------------------	--

(If travel outside of Texas, complete Schedule T)

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.

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POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME

WILLIAM B. HILGERS, TREASURER

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Payee name

7 Amount (\$)

10/26/06

COPY-DOCS

6 Payee address; City; State; Zip Code

823 CONGRESS AVE., STATE PLAZA 10
AUSTIN, TX 78701

\$460.06

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

PHOTOCOPIES

(If travel outside of Texas, complete Schedule T)

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.)

- Complete if direct expenditure to benefit C/OH -

Candidate / Officeholder name Office sought Office held

(If travel outside of Texas, complete Schedule T)

Date

Payee name

Amount (\$)

Payee address; City; State; Zip Code

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

- Complete if direct expenditure to benefit C/OH -

Candidate / Officeholder name Office sought Office held

(If travel outside of Texas, complete Schedule T)

Date

Payee name

Amount (\$)

Payee address; City; State; Zip Code

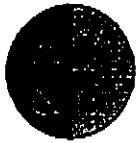
Purpose of payment (See instructions regarding type of information required.)

- Complete if direct expenditure to benefit C/OH -

Candidate / Officeholder name Office sought Office held

(If travel outside of Texas, complete Schedule T)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED



Hilgers Bell & Richards
Attorneys at Law

816 Congress, Suite 1200
Austin, Texas 78701
Phone (512) 476-0005
Fax (512) 476-1513
www.hbrfirm.com

DATE: October 26, 2006

FILED FOR RECORD
2006 OCT 26 PM 4:20
DANA DEBEAUVOIR
COUNTY CLERK
TRAVIS COUNTY TEXAS

To: Dana DeBeauvoir Fax: 854-9075
Attn: Gail Fisher

From: William B. Hilgers Pages: 5

File #: 998.007 File Name: Elroy Library

Re: Operator: sn

Urgent For Review Please Comment Please Reply Please Recycle

● Comments:

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