

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

6428

FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers) 00000001	2 PAGE # 1 of 13
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST Gerald LAST Daugherty NICKNAME SUFFIX	OFFICE USE ONLY Date Received Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX: 1403 Club Ridge Cove Austin, TX 78735 APT / SUITE #: CITY: STATE: ZIP CODE		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST Hector LAST DeLeon NICKNAME SUFFIX		
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE): 221 W 6th St 1050 Austin, TX 78701 APT / SUITE #: CITY: STATE: ZIP CODE		
7 CAMPAIGN TREASURER PHONE	AREA CODE (512) 478-5308 PHONE NUMBER EXTENSION		
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 07/01/2006 THROUGH 12/31/2006		
10 ELECTION	ELECTION DATE Month Day Year 03/11/2008	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) Commissioner, Pct. 3	12 OFFICE SOUGHT (if known)	
13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS	<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</p> <p>Address: PO Box Apt / Suite #: City State Zip Code</p> <p><input type="checkbox"/> additional pages</p>		

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

**FORM C/OH
COVER SHEET PG 2**

14 C/OH NAME Daugherty, Gerald

15 ACCOUNT # (Ethics Commission filers)
00000001

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

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

17 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) \$ 2,000.00

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED \$ 522.59

4. TOTAL POLITICAL EXPENDITURES \$ 31,700.05

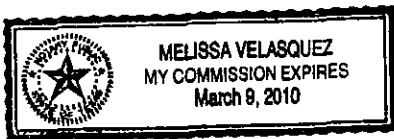
CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 1,168.07

OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 0.00

18 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.

Gerald Daugherty
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Gerald Daugherty, this the 12 day of January, 2007, to certify which, witness my hand and seal of office.

Melissa Velasquez
Signature of officer administering oath

Melissa Velasquez
Print name of officer administering oath

Notary
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 1/3 Report: 3/13

2 FILER NAME Daugherty, Gerald

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

08/07/2006

5 Full name of contributor out-of-state PAC(ID# _____)
Ball, B. Lamar Jr.

6 Contributor address: City: State: Zip Code
4850 Plaza Dr
Irving, TX 75063-2317

7 Amount of contribution (\$)

\$250.00

8 Principal occupation / Job title (See instructions)

9 Employer (See instructions)

10 In-kind contribution

Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.

11 In-kind description (if applicable)

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location

14 Departure date

15 Destination city / location

16 Arrival date

17 Means of transportation

18 Purpose of travel

4 Date

08/07/2006

5 Full name of contributor out-of-state PAC(ID# _____)
Giamboi, Thomas M.

6 Contributor address: City: State: Zip Code
3312 Bryker Dr
Austin, TX 78703-1332

7 Amount of contribution (\$)

\$500.00

8 Principal occupation / Job title (See instructions)

9 Employer (See instructions)

10 In-kind contribution

Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.

11 In-kind description (if applicable)

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location

14 Departure date

15 Destination city / location

16 Arrival date

17 Means of transportation

18 Purpose of travel

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 2/3 Report: 4/13	
2 FILER NAME Daugherty, Gerald			3 ACCOUNT # (Ethics Commission filers) 00000001		
4 Date 08/07/2006	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) King, Mason		7 Amount of contribution (\$) \$250.00		
6 Contributor address: City: State; Zip Code 4717 Crestline Rd Fort Worth, TX 76107-1507					
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		
4 Date 08/07/2006	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) LAKEPAC		7 Amount of contribution (\$) \$500.00		
6 Contributor address: City: State; Zip Code 711 Mariner Lakeway, TX 78734-4342					
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 3/3 Report: 5/13

2 FILER NAME Daugherty, Gerald

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

08/07/2006

5 Full name of contributor out-of-state PAC(ID# _____)
Spiegelhauer, Jeffery L.

6 Contributor address: City: State: Zip Code
12618 Everhart Pointe Dr
Tomball, TX 77377-8033

7 Amount of contribution (\$)

\$250.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

10 In-kind contribution

Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.

11 In-kind description (if applicable)

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location

14 Departure date

15 Destination city / location

16 Arrival date

17 Means of transportation

18 Purpose of travel

4 Date

08/07/2006

5 Full name of contributor out-of-state PAC(ID# _____)
Swanick, Patrick J.

6 Contributor address: City: State: Zip Code
7601 Riako Blvd Apt 2212
Austin, TX 78735-7437

7 Amount of contribution (\$)

\$250.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

10 In-kind contribution

Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.

11 In-kind description (if applicable)

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location

14 Departure date

15 Destination city / location

16 Arrival date

17 Means of transportation

18 Purpose of travel

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/8 Report: 6/13	
2 FILER NAME Daugherty, Gerald		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 12/30/2006	5 Payee name 2007 Texas Inaugural Committee 6 Payee address; City; State; Zip Code PO Box 684428 Austin, TX 78768-4428	7 Amount (\$) \$150.00	
8 Purpose of payment (See instructions regarding type of information required.) Event <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:	
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)			
11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	
4 Date 07/05/2006	5 Payee name Davis, Mistie 6 Payee address; City; State; Zip Code 6201 Colina Ln Austin, TX 78759-4767	7 Amount (\$) \$750.00	
8 Purpose of payment (See instructions regarding type of information required.) Contract labor <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:	
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)			
11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/8 Report: 7/13	
2 FILER NAME Daugherty, Gerald		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 12/30/2006	5 Payee name Davis, Mistie 6 Payee address; City; State; Zip Code 6201 Colina Ln Austin, TX 78759-4767	7 Amount (\$) \$600.00	
8 Purpose of payment (See instructions regarding type of information required.) Contract labor <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:	
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)			
11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation:		16 Purpose of travel:	
4 Date 08/02/2006	5 Payee name Hoovers Cooking 6 Payee address; City; State; Zip Code 2002 Manor Rd Austin, TX 78722-2436	7 Amount (\$) \$55.00	
8 Purpose of payment (See instructions regarding type of information required.) Meeting <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:	
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)			
11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation:		16 Purpose of travel:	

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 3/8 Report: 8/13		
2 FILER NAME Daugherty, Gerald			3 ACCOUNT # (Ethics Commission filers) 00000001		
4 Date 07/24/2006	5 Payee name Lake Travis Republican Club PAC 6 Payee address; City; State; Zip Code PO Box 340033 Austin, TX 78734-0001	7 Amount (\$) \$275.00			
8 Purpose of payment (See instructions regarding type of information required.) Contribution <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:			
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)					
11 Departure city / location		12 Departure date	13 Destination city / location		14 Arrival date
15 Means of transportation			16 Purpose of travel		
4 Date 07/10/2006	5 Payee name Lake Travis Republican Women PAC 6 Payee address; City; State; Zip Code 106 Nakoma Dr Lakeway, TX 78734-4551	7 Amount (\$) \$125.00			
8 Purpose of payment (See instructions regarding type of information required.) Sponsorship <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:			
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)					
11 Departure city / location		12 Departure date	13 Destination city / location		14 Arrival date
15 Means of transportation			16 Purpose of travel		

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 4/8 Report: 9/13

2 FILER NAME Daugherty, Gerald

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date 07/24/2006	5 Payee name Melissa Goodwin Campaign 6 Payee address; City; State; Zip Code 806 W 11th St Austin, TX 78701-2010	7 Amount (\$) \$100.00
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8 Purpose of payment (See instructions regarding type of information required.) Sponsorship <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
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10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	

4 Date 09/11/2006	5 Payee name Melissa Goodwin Campaign 6 Payee address; City; State; Zip Code 806 W 11th St Austin, TX 78701-2010	7 Amount (\$) \$250.00
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8 Purpose of payment (See instructions regarding type of information required.) ACTPAC Sponsor Reimburse <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
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10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 5/8 Report: 10/13**2** FILER NAME Daugherty, Gerald**3** ACCOUNT # (Ethics Commission filers)
00000001

4 Date 11/26/2006	5 Payee name Oak Hill Business & Prof. Asso. 6 Payee address; City: State; Zip Code 8656 W Highway 71 Austin, TX 78735-8074	7 Amount (\$) \$100.00
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8 Purpose of payment (See instructions regarding type of information required.) 25th Anniversary Sponsorship <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
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10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)
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11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	

4 Date 11/29/2006	5 Payee name Omni Hotel 6 Payee address; City: State; Zip Code 701 Brazos St Austin, TX 78701-3258	7 Amount (\$) \$142.71
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8 Purpose of payment (See instructions regarding type of information required.) Breakfast Meeting <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
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10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)
--

11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/8 Report: 11/13	
2 FILER NAME Daugherty, Gerald		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 07/16/2006	5 Payee name Sam's Club 6 Payee address: City: State: Zip Code 4970 W Highway 290 Austin, TX 78735-6748	7 Amount (\$) \$129.75	
8 Purpose of payment (See instructions regarding type of information required.) Supplies <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:	
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)			
11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	
4 Date 07/05/2006	5 Payee name TRACPAC 6 Payee address: City: State: Zip Code 10711 Burnet Rd Austin, TX 78758-4457	7 Amount (\$) \$5,000.00	
8 Purpose of payment (See instructions regarding type of information required.) Loan <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:	
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)			
11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/8 Report: 12/13	
2 FILER NAME Daugherty, Gerald		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 07/27/2006	5 Payee name TRACPAC 6 Payee address; City; State; Zip Code 10711 Burnet Rd Austin, TX 78758-4457	7 Amount (\$) \$10,000.00	
8 Purpose of payment (See instructions regarding type of information required.) Loan <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:	
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)			
11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	
4 Date 08/29/2006	5 Payee name TRACPAC 6 Payee address; City; State; Zip Code 10711 Burnet Rd Austin, TX 78758-4457	7 Amount (\$) \$10,000.00	
8 Purpose of payment (See instructions regarding type of information required.) Loan <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:	
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)			
11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/8 Report: 13/13	
2 FILER NAME Daugherty, Gerald		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 12/06/2006	5 Payee name TRACPAC 6 Payee address; City; State; Zip Code 10711 Burnet Rd Austin, TX 78758-4457	7 Amount (S) \$3,500.00	
8 Purpose of payment (See instructions regarding type of information required.) Loan <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:	
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)			
11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	