

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

6455

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form. **1 ACCOUNT#** (Ethics Commission filers) **2 Total pages filed:** 7

**3 CANDIDATE / OFFICEHOLDER NAME**  
 MS / MRS / MR: \_\_\_\_\_ FIRST: Ronald MI: D.  
 NICKNAME: Ronnie LAST: Eade SUFFIX: \_\_\_\_\_

**OFFICE USE ONLY**  
 Date Received: \_\_\_\_\_  
 Date Hand-delivered or Date Postmarked: \_\_\_\_\_  
 Receipt #: \_\_\_\_\_ Amount: \_\_\_\_\_  
 Date Processed: \_\_\_\_\_  
 Date Imaged: \_\_\_\_\_

**4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS**  
 ADDRESS / PO BOX: P.O. Box 2092 APT / SUITE #: \_\_\_\_\_ CITY: Austin, Texas STATE: TX ZIP CODE: 78768  
 Change of Address

**5 CANDIDATE / OFFICEHOLDER PHONE**  
 AREA CODE: (512) PHONE NUMBER: 263-5235 EXTENSION: \_\_\_\_\_

**6 CAMPAIGN TREASURER NAME**  
 MS / MRS / MR: \_\_\_\_\_ FIRST: Joe MI: R.  
 NICKNAME: \_\_\_\_\_ LAST: Long SUFFIX: \_\_\_\_\_

**7 CAMPAIGN TREASURER ADDRESS**  
 STREET ADDRESS (NO PO BOX PLEASE): 300 W. 6th St., Ste. 1950 Austin TX APT / SUITE #: \_\_\_\_\_ CITY: 78701 STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_  
 (Residence or business)

**8 CAMPAIGN TREASURER PHONE**  
 AREA CODE: (512) PHONE NUMBER: 472-1554 EXTENSION: \_\_\_\_\_

**9 REPORT TYPE**  
 January 15  30th day before election  Final report (Attach C/OH - FR)  Exceeded \$500 limit  
 July 15  8th day before election  Runoff  15th day after campaign treasurer appointment (officeholder only)

**10 PERIOD COVERED**  
 Month Day Year: 07/01/06 THROUGH Month Day Year: 12/31/06

**11 ELECTION**  
 ELECTION DATE: Month Day Year: / / ELECTION TYPE:  Primary  Runoff  General  Special

**12 OFFICE** OFFICE HELD (if any): Travis County District Attorney **13 OFFICE SOUGHT** (if known): \_\_\_\_\_

**14 NOTICE OF 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: \_\_\_\_\_  
 additional pages

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

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

15 C/OH NAME Ronald D. Earle 16 ACCOUNT # (Ethics Commission Filers)

17 NOTICE FROM POLITICAL COMMITTEE(S)

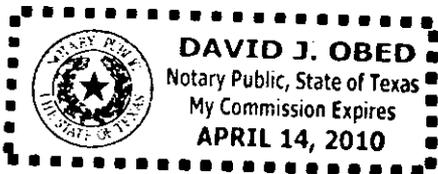
-- This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. --

additional pages

COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> GENERAL	
<input type="checkbox"/> SPECIFIC	
	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	\$ 50.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 50.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ 523.72
	4. TOTAL POLITICAL EXPENDITURES	\$ 2498.81
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 42040.89
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ - 0 -

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.

Ronald D. Earle  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said RONALD D. EARLE, this the 18<sup>TH</sup> day of JANUARY, 20 07, to certify which, witness my hand and seal of office.

David J. Obed DAVID J. OBED, DEPUTY REGISTRAR

# POLITICAL EXPENDITURES

# SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: **2**

2 FILER NAME **Ronald D. Earle**

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name <b>See attached</b>	7 Amount (\$)
6 Payee address: City: State: Zip Code		

8 Purpose of payment (See instructions regarding type of information required.)  (If travel outside of Texas, complete Schedule T)	9 <b>** Complete if direct expenditure to benefit C/OH **</b> 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.)  (If travel outside of Texas, complete Schedule T)	9 <b>** Complete if direct expenditure to benefit C/OH **</b> 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.)  (If travel outside of Texas, complete Schedule T)	9 <b>** Complete if direct expenditure to benefit C/OH **</b> 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.)  (If travel outside of Texas, complete Schedule T)	9 <b>** Complete if direct expenditure to benefit C/OH **</b> Candidate / Officeholder name Office sought Office held
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## Schedule F expenses:

4. Date	5. Payee	6. Payee address	7. Amt.	8. Purpose	9. C/OH
expenses over \$50:					
7/21/06	Book People	603 N. Lamar Austin TX 78703	\$98.44	publications	
7/20/06	Wells Fargo Bank	P. O. Box 2019 Austin TX 78768-2019	\$31.50	bank fees	
8/20/06	Wells Fargo Bank	P. O. Box 2019 Austin TX 78768-2019	\$31.50	bank fees	
8/22/06	Book People	603 N. Lamar Austin TX 78703	\$45.46	publications	
8/28/06	Darla Gay	P. O. Box 1748, Austin TX 78767	\$89.00	meeting meal	
expense					
9/6/06	BayardoSpecEvFnd	314 W. 11th St., Rm 535, Austin TX	\$100.00	donation	
9/15/06	Castle Hill Cafe	Austin TX	\$57.74	meal expense	
9/20/06	Wells Fargo Bank	P. O. Box 2019 Austin TX 78768-2019	\$31.50	bank fees	
9/29/06	Las Manitas Cafe	211 Congress Ave. Austin TX 78701	\$100.00	contribution	
10/17/06	Book People Bookstore	603 N. Lamar Austin TX 78703	\$28.00	publications	
10/19/06	Wells Fargo Bank	P. O. Box 2019 Austin TX 78768-2019	\$31.50	bank fees	
11/8/06	Jet Blue Airways	mail@jetblueconnect.com	\$254.30	travel expense	
11/10/06	Southwest Airlines	Dallas TX 1-800-IFL-YSWA	\$238.10	travel expense	
11/17/06	Wells Fargo Bank	P. O. Box 2019 Austin TX 78768-2019	\$32.96	bank fees	
12/11/06	Southwest Airlines	Dallas TX 1-800-IFL-YSWA	\$238.10	travel expense	
12/15/06	CombineCharitiesCamp	POBox1748AustinTX78767	\$200.00	contribution	
12/27/06	Book People Bookstore	603 N. Lamar Austin TX 78703	\$29.17	publications	
12/19/06	Wells Fargo Bank	P. O. Box 2019 Austin TX 78768-2019	\$71.50	bank fees	
12/27/06	Book People Bookstore	603 N. Lamar Austin TX 78703	\$23.94	publications	

**POLITICAL EXPENDITURES  
MADE FROM PERSONAL FUNDS**

**SCHEDULE G**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 1

2 FILER NAME Ronald D. Earle

3 ACCOUNT # (Ethics Commission filers)

4 Date <u>11/13/06</u>	5 Payee name <u>NY Helmsley Hotel</u> 6 Payee address; City; State; Zip Code <u>212 E. 42nd St., NY, NY, 10017</u>	8 Amount (\$) <u>242.38</u>
7 Purpose of expenditure (See instructions regarding type of information required.) <u>travel</u> (If travel outside of Texas, complete Schedule T)		<input checked="" type="checkbox"/> Reimbursement from political contributions intended

Date	Payee name Payee address; City; State; Zip Code	Amount (\$)
Purpose of expenditure (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)		<input type="checkbox"/> Reimbursement from political contributions intended

Date	Payee name Payee address; City; State; Zip Code	Amount (\$)
Purpose of expenditure (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)		<input type="checkbox"/> Reimbursement from political contributions intended

Date	Payee name Payee address; City; State; Zip Code	Amount (\$)
Purpose of expenditure (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)		<input type="checkbox"/> Reimbursement from political contributions intended

Date	Payee name Payee address; City; State; Zip Code	Amount (\$)
Purpose of expenditure (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)		<input type="checkbox"/> Reimbursement from political contributions intended

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

**IN-KIND CONTRIBUTION OR POLITICAL EXPENDITURE FOR TRAVEL OUTSIDE OF TEXAS**

**SCHEDULE T**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule T: <u>2</u>
2 FILER NAME <u>Ronald D. Earle</u>		3 ACCOUNT # (Ethics Commission filers)
4 Name of Contributor / Corporation or Labor Organization / Pledgor (Payee) <u>various payees for expenses less than \$50.00</u>		
5 Contribution / Expenditure reported on: <u>Form EIOH cover sheet pg. 2 line 3</u>		
<input type="checkbox"/> Schedule A <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule C <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule N <input type="checkbox"/> COH-UC <input type="checkbox"/> COH-T <input type="checkbox"/> PAC-T <input type="checkbox"/> SPAC-T		
6 Dates of travel <u>10/8/06-10/9/06</u>	7 Name of person(s) traveling <u>Ronald D. Earle</u>	
	8 Departure city or name of departure location <u>Austin TX ABIA Airport</u>	
	9 Destination city or name of destination location <u>Portland OR</u>	
10 Means of transportation <u>airline + ground transp.</u>	11 Purpose of travel (including name of conference, seminar, or other event) <u>52<sup>nd</sup> Annual Conference International Downtown Assn, Keynote</u>	
Name of Contributor / Corporation or Labor Organization / Pledgor (Payee) <u>NY Helmsley Hotel</u>		
Contribution / Expenditure reported on:		
<input type="checkbox"/> Schedule A <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule C <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F <input checked="" type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule N <input type="checkbox"/> COH-UC <input type="checkbox"/> COH-T <input type="checkbox"/> PAC-T <input type="checkbox"/> SPAC-T		
Dates of travel <u>11/9/06-11/11/06</u>	Name of person(s) traveling <u>Ronald D. Earle</u>	
	Departure city or name of departure location <u>Austin TX ABIA airport</u>	
	Destination city or name of destination location <u>New York NY</u>	
Means of transportation <u>airline + ground transp.</u>	Purpose of travel (including name of conference, seminar, or other event) <u>Speaker, Cardozo Law School, Restorative Justice Conf.</u>	
Name of Contributor / Corporation or Labor Organization / Pledgor (Payee) <u>Jet Blue Airways</u>		
Contribution / Expenditure reported on:		
<input type="checkbox"/> Schedule A <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule C <input type="checkbox"/> Schedule D <input checked="" type="checkbox"/> Schedule F <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule N <input type="checkbox"/> COH-UC <input type="checkbox"/> COH-T <input type="checkbox"/> PAC-T <input type="checkbox"/> SPAC-T		
Dates of travel <u>11/9/06-11/10/06</u>	Name of person(s) traveling <u>Ronald D. Earle</u>	
	Departure city or name of departure location <u>New York NY JFK airport</u>	
	Destination city or name of destination location <u>Austin TX</u>	
Means of transportation <u>airline + ground transp.</u>	Purpose of travel (including name of conference, seminar, or other event) <u>Speaker, Cardozo Law School, Restorative Justice Conf.</u>	

**IN-KIND CONTRIBUTION OR POLITICAL EXPENDITURE FOR TRAVEL OUTSIDE OF TEXAS**

**SCHEDULE T**

The Instruction Guide explains how to complete this form. 1 Total pages Schedule T: 2

2 FILER NAME Ronald D. Earle 3 ACCOUNT # (Ethics Commission filers)

4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee  
Various payers for expenses less than \$50

5 Contribution / Expenditure reported on: Form CJOH cover sheet pg. 2 line 3  
 Schedule A  Schedule B  Schedule C  Schedule D  Schedule F  Schedule G  
 Schedule H  Schedule N  COH-UC  COH-T  PAC-T  SPAC-T

6 Dates of travel 7 Name of person(s) traveling  
Ronald D. Earle

11/19/06 - 11/24/06 8 Departure city or name of departure location  
Austin TX

9 Destination city or name of destination location  
NY, NY and return

10 Means of transportation 11 Purpose of travel (including name of conference, seminar, or other event)  
airline + ground trans Speaker Cardozo Law School, Restorative Justice conf.

Name of Contributor / Corporation or Labor Organization / Pledgor / Payee

Contribution / Expenditure reported on:  
 Schedule A  Schedule B  Schedule C  Schedule D  Schedule F  Schedule G  
 Schedule H  Schedule N  COH-UC  COH-T  PAC-T  SPAC-T

Dates of travel Name of person(s) traveling

Departure city or name of departure location

Destination city or name of destination location

Means of transportation Purpose of travel (including name of conference, seminar, or other event)

Name of Contributor / Corporation or Labor Organization / Pledgor / Payee

Contribution / Expenditure reported on:  
 Schedule A  Schedule B  Schedule C  Schedule D  Schedule F  Schedule G  
 Schedule H  Schedule N  COH-UC  COH-T  PAC-T  SPAC-T

Dates of travel Name of person(s) traveling

Departure city or name of departure location

Destination city or name of destination location

Means of transportation Purpose of travel (including name of conference, seminar, or other event)

