

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

6715

FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION Guide explains how to complete this form.

1 ACCOUNT # (Ethics Commission filers) 00006595

2 PAGE # 1 of 9

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR Mr. FIRST Gary MI LAST Cobb SUFFIX

OFFICE USE ONLY

Date Received JAN 23 PM 4:10 FOR RECORD COUNTY CLERK TRAVIS COUNTY TEXAS Date Hand-delivered or Date Postmarked

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 142416 Austin, TX 78714

Change of Address

Receipt # Amount Date Processed Date Imaged

5 CAMPAIGN TREASURER NAME

MS / MRS / MR Mr. FIRST Carl S MI LAST Richie SUFFIX

6 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1122 Colorado St Ste 210 Austin, TX 78701

7 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION (512) 478-3800

8 REPORT TYPE

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

9 PERIOD COVERED

Month Day Year 07/01/2007 THROUGH Month Day Year 12/31/2007

10 ELECTION

ELECTION DATE Month Day Year 03/04/2008 ELECTION TYPE Primary Runoff General Special

11 OFFICE

OFFICE HELD (if any)

12 OFFICE SOUGHT (if known) Travis County DA

13 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

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME Cobb, Gary (Mr.)

15 ACCOUNT # (Ethics Commission filers)  
00006595

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
<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS
<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

additional pages

17 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 45.00
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2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 4,645.00
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EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ 8.96
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4. TOTAL POLITICAL EXPENDITURES	\$ 1,768.30
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CONTRIBUTION BALANCE

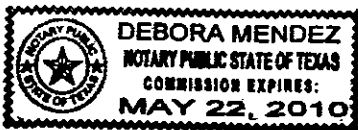
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 5,108.25
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OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 3,000.00
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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.



*[Handwritten Signature]*  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Gary Cobb this the 15<sup>th</sup> day of January, 2008, to certify which, witness my hand and seal of office.

*[Handwritten Signature]*      *[Handwritten Signature]*      *[Handwritten Signature]*  
Signature of officer administering oath      Print name of officer administering oath      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: 1/2 Report: 3/9	
2 FILER NAME Cobb, Gary (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00006595	
4 Date  12/17/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Goldston, Carolyn  6 Contributor address; City; State; Zip Code 3521 Starline Dr Austin, TX 78759	7 Amount of contribution (\$)  \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  11/30/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Herring & Irwin LLP  Contributor address; City; State; Zip Code 1105 W 12th St Austin, TX 78703	Amount of contribution (\$)  \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  12/18/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nemir, Pamela  Contributor address; City; State; Zip Code 5703 Scout Bluff Austin, TX 78731	Amount of contribution (\$)  \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  12/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Price, Velva  Contributor address; City; State; Zip Code 1601 Ridgemont Dr Austin, TX 78723	Amount of contribution (\$)  \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  12/18/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sage, Karen  Contributor address; City; State; Zip Code 3211 Riva Ridge Rd Austin, TX 78748	Amount of contribution (\$)  \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #  
Schedule: 2/2 Report: 4/9

2 FILER NAME Cobb, Gary (Mr.)

3 ACCOUNT # (Ethics Commission filers)  
00006595

4 Date 5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
11/09/2007 Smith-Jones, Leadra (Ms.)

6 Contributor address; City; State; Zip Code  
1101D Thorpe St  
San Marcos, TX 78666

7 Amount of contribution (\$) 8 In-kind contribution description (if applicable)  
\$250.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
12/24/2007 Wassenich, James

Contributor address; City; State; Zip Code  
1611 Waterston  
Austin, TX 78703

Amount of contribution (\$) In-kind contribution description (if applicable)  
\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
12/31/2007 Zak, Jessica

Contributor address; City; State; Zip Code  
909 Nueces St  
Austin, TX 78701

Amount of contribution (\$) In-kind contribution description (if applicable)  
\$1,000.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**PLEGGED CONTRIBUTIONS****SCHEDULE B**

The instruction Guide explains how to complete this form.

**1** PAGE #  
Schedule: 1/1 Report: 5/9**2** FILER NAME Cobb, Gary (Mr.)**3** ACCOUNT # (Ethics Commission filers)  
00006595**4** TOTAL OF UNITEMIZED PLEDGES:      ⇨   ⇨   ⇨   ⇨   ⇨   ⇨

\$

**5** Date  
12/31/2007**6** Full name of pledgor  out-of-state PAC (ID# \_\_\_\_\_)  
Bell, Hubert Jr.**8** Amount of  
pledge (\$)**9** In-kind description  
(if applicable)

12/31/2007

**7** Pledgor address;      City; State; Zip Code  
1807 Lamar Blvd Ste 300  
Austin, TX 78705

\$1,000.00

(If travel outside of Texas, complete Schedule T) **10** Principal occupation / Job title (See Instructions)**11** Employer (See Instructions)

# LOANS

# SCHEDULE E

The **INSTRUCTION GUIDE** explains how to complete this form.

**1** PAGE #  
Schedule: 1/1 Report: 6/9

**2** FILER NAME Cobb, Gary (Mr.)

**3** ACCOUNT # (Ethics Commission filers)  
00006595

**4** TOTAL OF UNITEMIZED LOANS:                   ⇒⇒⇒⇒⇒⇒⇒

\$

**5** Date of loan  
12/18/2007

**7** Name of lender                    out-of-state PAC (ID# \_\_\_\_\_)  
Cobb, Gary

**9** Loan Amount (\$)  
\$3,000.00

**6** Is lender a  
financial institution?  
  
No

**8** Lender address; City;     State;     Zip Code  
.....  
4325 Triboro Trail  
Austin, TX 78749

**10** Interest rate  
0

**11** Maturity date  
12/18/2008

**12** Principal occupation / Job title (See Instructions)  
Assistant District Attorney

**13** Employer (See Instructions)  
Travis County District Attorney's Office

**14** Description of Collateral  
 none

**15** GUARANTOR  
INFORMATION  
  
 not applicable

**16** Name of guarantor  
  
.....  
**17** Guarantor address; City;     State;     Zip Code

**18** Amount Guaranteed (\$)

**19** Principal Occupation

**20** Employer

**POLITICAL EXPENDITURES****SCHEDULE F**The **INSTRUCTION GUIDE** explains how to complete this form.**1** PAGE #  
Schedule: 1/1 Report: 7/9**2** FILER NAME Cobb, Gary (Mr.)**3** ACCOUNT # (Ethics Commission filers)  
00006595

4 Date	5 Payee name	7 Amount (\$)
12/18/2007	Linkes, Matt <hr/> <b>6</b> Payee address; City; State; Zip Code PO Box 300045 Austin, TX 78703	\$273.74

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

Photography

(If travel outside of Texas, complete Schedule T) **9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:Office sought:  
Office held:

Date	Payee name	Amount (\$)
12/18/2007	Super Cheap Signs <hr/> Payee address; City; State; Zip Code 9804 Gray Blvd Austin, TX 78758	\$12.12

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

signs

(If travel outside of Texas, complete Schedule T) **\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\***  
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 PAGE #**  
Schedule: 1/1 Report: 8/9

**2 FILER NAME** Cobb, Gary (Mr.)

**3 ACCOUNT #** (Ethics Commission filers)  
00006595

4 Date	5 Payee name	8 Amount (\$)
11/21/2007	Clarke American Checks Incorporated <hr/> Payee address; City; State; Zip Code 10931 Laureate Dr San Antonio, TX 78249  Purpose of expenditure (See instructions regarding type of information required.) check order  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	\$92.27  <input type="checkbox"/> Reimbursement from political contributions intended
12/18/2007	Super Cheap Signs <hr/> Payee address; City; State; Zip Code 9804 Gray Blvd Austin, TX 78758  Purpose of expenditure (See instructions regarding type of information required.) signs  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	\$65.60  <input type="checkbox"/> Reimbursement from political contributions intended
12/18/2007	Super Cheap Signs <hr/> Payee address; City; State; Zip Code 9804 Gray Blvd Austin, TX 78758  Purpose of expenditure (See instructions regarding type of information required.) signs  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	\$65.61  <input type="checkbox"/> Reimbursement from political contributions intended
12/13/2007	Travis County Democratic Party <hr/> Payee address; City; State; Zip Code 1311 East 6th Street Austin, TX 78702  Purpose of expenditure (See instructions regarding type of information required.) Filing Fee  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	\$1,250.00  <input type="checkbox"/> Reimbursement from political contributions intended



# CREDITS (optional)

# SCHEDULE K

The INSTRUCTION GUIDE explains how to complete this form.

**1 PAGE #**  
Schedule: 1/1 Report: 9/9

**2 FILER NAME** Cobb, Gary (Mr.)

**3 ACCOUNT #** (Ethics Commission filers)  
00006595

**4 Date**  
  
12/31/2007

**5 Payor name**  
University Federal Credit Union

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**6 Payor address; City; State; Zip Code**  
702 Colorado St  
Austin, TX 78701

**8 Amount (\$)**  
  
\$0.61

**7 Reason for credit**  
Interest

# Alfred Stanley

January 23, 2008

BY HAND

Travis County Elections Division  
ATTN: Mary Fero  
5501 Airport Blvd  
Austin, TX 78701

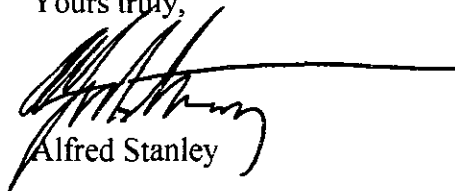
Dear Mary:

On January 15, 2008, I personally mailed from the Austin Main Post Office on Cross Park Drive an original of Gary Cobb's sworn and notarized Candidate/Office Holder Campaign Finance Report due on January 15, 2008 to the following address:

Travis Co. Clerk  
ATTN: Elections Division  
PO Box 149325  
Austin, TX 78714-9325

Checking on your website today, I could not find a copy of the report and called your office, and you informed me that your office had not received it. A copy of the report is attached. Please note that page 2 of the report was notarized on January 15, 2008.

Yours truly,



Alfred Stanley