

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

6817

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:
3 CANDIDATE / OFFICEHOLDER NAME	MS (MRS) / MR FIRST MI NICKNAME LAST SUFFIX Welda W. Spears	<div style="border: 2px solid black; padding: 5px;"> OFFICE USE ONLY Date Received: FEB 25 PM 5:09 Date Hand-delivered or Date Postmarked: 9 Receipt # Amount Date Processed Date Imaged </div>	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE 11116 Amaranth Ln. Austin TX 78754		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 278-0288		
6 CAMPAIGN TREASURER NAME	MS / MRS (MR) FIRST MI NICKNAME LAST SUFFIX Bill Aleshire		
7 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE 700 havana, Ste. 920 Austin, TX 78701		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 457-9838		
9 REPORT TYPE	<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 type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year 01 / 26 / 08 THROUGH 02 / /		
11 ELECTION	ELECTION DATE Month Day Year 23 / 04 / 08	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any) Travis Co. Tax Assessor-Collector	13 OFFICE SOUGHT (if known) Travis Co. Tax Assessor-Collector	
14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS <input type="checkbox"/> additional pages	** 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		
GO TO PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME

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. **

COMMITTEE TYPE

GENERAL

SPECIFIC

additional pages

COMMITTEE NAME

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

\$

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

\$ 23,585.00

EXPENDITURE TOTALS

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

\$

4. TOTAL POLITICAL EXPENDITURES

\$ 18,548.93

CONTRIBUTION BALANCE

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

\$ 8,575.95

OUTSTANDING LOAN TOTALS

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

\$

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.

Milda Wells Spears

Signature of Candidate or Officeholder

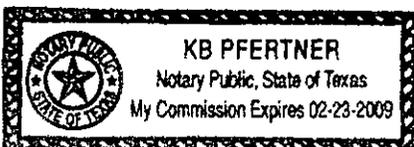
AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said MILDA WELLS SPEARS, this the 25TH day of FEB, 2008, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed 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 Total pages Schedule A: **17**

2 FILER NAME

Nelda Wells Spears

3 ACCOUNT # (Ethics Commission filers)

4 Date

2-06-08

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

Heaver Alexander

6 Contributor address; City; State; Zip Code

*1303 Comal St.
Austin, TX 78702*

7 Amount of contribution (\$)

\$100.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

2-07-08

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

Armbrust & Brown LLP

Contributor address; City; State; Zip Code

*100 Congress Ave., Ste. 1300
Austin, TX 78701*

Amount of contribution (\$)

\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2-06-08

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

Timy Baranoff

Contributor address; City; State; Zip Code

*2307 Tower Dr.
Austin, TX 78703*

Amount of contribution (\$)

\$50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2-20-08

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

Becky Beaver

Contributor address; City; State; Zip Code

*816 Congress Ave., Ste. 1600
Austin, TX 78701*

Amount of contribution (\$)

\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2-07-08

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

Roger K. Beasley

Contributor address; City; State; Zip Code

*3200 Steck Ave., Ste. 240
Austin, TX 78766*

Amount of contribution (\$)

\$500.00

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.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <p style="text-align: right; font-size: 1.2em;">17</p>	
2 FILER NAME <p style="font-size: 1.2em;">Nelda Wells Spears</p>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <p style="font-size: 1.2em;">2-07-08</p>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <p style="font-size: 1.2em;">M. W. Bell</p>	7 Amount of contribution (\$) <p style="font-size: 1.2em;">\$ 25.00</p>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <p style="font-size: 1.2em;">11217 Taterwood Dr. Austin, TX 78750</p>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <p style="font-size: 1.2em;">2-13-08</p>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <p style="font-size: 1.2em;">Sam Biscoe</p>	Amount of contribution (\$) <p style="font-size: 1.2em;">\$1,000.00</p>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <p style="font-size: 1.2em;">6411 Bridgewater Dr. Austin, TX 78723</p>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <p style="font-size: 1.2em;">2-12-08</p>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <p style="font-size: 1.2em;">Terrell Blodgett</p>	Amount of contribution (\$) <p style="font-size: 1.2em;">\$ 100.00</p>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <p style="font-size: 1.2em;">1801 Lavaca -13-E Austin, TX</p>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <p style="font-size: 1.2em;">2-20-08</p>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <p style="font-size: 1.2em;">BMC PAC</p>	Amount of contribution (\$) <p style="font-size: 1.2em;">\$ 500.00</p>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <p style="font-size: 1.2em;">111 Congress Ave. Austin, TX 78701</p>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <p style="font-size: 1.2em;">2-07-08</p>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <p style="font-size: 1.2em;">J. Vaughn Brock</p>	Amount of contribution (\$) <p style="font-size: 1.2em;">\$ 500.00</p>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <p style="font-size: 1.2em;">P.O. Box 160340 Austin, TX 78716-0340</p>		(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
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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

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2 FILER NAME <i>Nelda Wells Spears</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>2-01-08</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Richard & Claire Brooks</i>	7 Amount of contribution (\$) <i>\$100.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>P.O. Box 4534 Austin, TX 78765-4534</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>2-19-08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Gaylon Clark</i>	Amount of contribution (\$) <i>\$500.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>809 Point Run Dr. Pflugerville, TX 78660</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2-07-08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>James M. Connolly</i>	Amount of contribution (\$) <i>\$100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>312 Malabar St. Lakeway, TX 78734</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2-13-08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Elna Christopher</i>	Amount of contribution (\$) <i>\$50.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>605 Kentshire Circle Austin TX 78704</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2-07-08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>William H. Cunningham</i>	Amount of contribution (\$) <i>\$500.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>P.O. Box E Austin, TX 78713</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

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2 FILER NAME <i>Nelda Wells Spears</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>2-13-08</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Jerry Dike</i>	7 Amount of contribution (\$) <i>\$ 100.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>3810 Tamarack Trail Austin, TX 78727</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>2-19-08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Mr. & Mrs. Royce Faulkner</i>	Amount of contribution (\$) <i>\$150.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>P.O. Box 585 Austin, TX 78767-0585</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2-07-08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Charlotte Flynn</i>	Amount of contribution (\$) <i>\$100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>7710 W. Rim Dr. Austin, TX 78731</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2-07-08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Heidi Gibbons</i>	Amount of contribution (\$) <i>\$25.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>613 Hearn St. Austin, TX 78763</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2-20-08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>J. Gill</i>	Amount of contribution (\$) <i>\$ 50.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>830 W. 3rd St. Austin, TX 78701</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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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: <p style="text-align: right;">17</p>	
2 FILER NAME <i>Nelda Wells Spears</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>2-19-08</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Wallace & Kay Graner</i>	7 Amount of contribution (\$) <i>\$250.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>3006 Bee Caves Rd. #B-160 Austin, TX 78746</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>2-07-08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Bryan Hardeman</i>	Amount of contribution (\$) <i>\$2,000.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2711 Seenic Dr. Austin, TX 78703</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2-12-08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Jim Hightower</i>	Amount of contribution (\$) <i>\$500.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>81 San Marcos Austin, TX 78702</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2-12-08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Ms. Ora Hunter</i>	Amount of contribution (\$) <i>\$ 10.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>Higgins St. Austin, TX 78701</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2-20-08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Bobby Inman</i>	Amount of contribution (\$) <i>\$150.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>3200 Riva Ridge Road Austin, TX 78746</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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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:
17

2 FILER NAME

Nelda Wells Spears

3 ACCOUNT # (Ethics Commission filers)

4 Date

2-12-08

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

Dusty + Linda Knight

6 Contributor address; City; State; Zip Code

136 Garrett St.
Austin, TX 78737

7 Amount of contribution (\$)

\$ 250.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

2-07-08

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

Anne T. Kohler

Contributor address; City; State; Zip Code

3902 Idlewild
Austin, TX 78731

Amount of contribution (\$)

\$ 50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2-19-08

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

Mrs. Bennie Jones

Contributor address; City; State; Zip Code

4901 Russet Hill Dr.
Austin, TX 78723

Amount of contribution (\$)

\$ 300.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2-19-08

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

John Lewis

Contributor address; City; State; Zip Code

1717 W. 6th St.
Austin, TX 78703

Amount of contribution (\$)

\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2-07-08

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

Ruth Marie

Contributor address; City; State; Zip Code

2103-B Wheless Ln.
Austin, TX 78723

Amount of contribution (\$)

\$20.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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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:	
2 FILER NAME Nelda Wells Spears		3 ACCOUNT # (Ethics Commission filers)	
4 Date 2-12-08	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Narvell Matthews 6 Contributor address; City; State; Zip Code 1810 Loreto Dr. Austin, TX 78721	7 Amount of contribution (\$) \$ 100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 2-07-08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Robbie June McArthur Contributor address; City; State; Zip Code 11116 Amaranth Ln. Austin, TX 78754	Amount of contribution (\$) \$ 100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 2-01-08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Evelyn McKee Contributor address; City; State; Zip Code P.O. Box 142495 Austin, TX 78714-2495	Amount of contribution (\$) \$ 100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 2-06-08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Christina Marton Contributor address; City; State; Zip Code 7409 Mifflin Kenedy Terrace Austin, TX 78749	Amount of contribution (\$) \$ 200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 2-07-08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Munday Enterprises Contributor address; City; State; Zip Code P.O. Box 1689 Austin, TX 78767	Amount of contribution (\$) \$ 1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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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:	
2 FILER NAME <i>Nelda Wells Spears</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>2-20-08</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Jimmy Nassour</i>	7 Amount of contribution (\$) <i>\$1,000.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>3839 Bee Cave Rd., Ste. 200 Austin, TX 78746</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>2-07-08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>William S. Oakey</i>	Amount of contribution (\$) <i>\$ 25.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1311 Exposition Blvd, #8 Austin, TX 78703</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2-08-08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>J. B. Pace</i>	Amount of contribution (\$) <i>\$ 200.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>3020 Thousand Oaks Dr. Austin, TX 78746</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2-13-07</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Ray, Wood + Bonilla</i>	Amount of contribution (\$) <i>\$500.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>P.O. Box 165001 Austin, TX 78716</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2-19-08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Alonzo Reyes</i>	Amount of contribution (\$) <i>\$ 50.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>4407 Norwood lane Austin, TX 78744</i>		(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
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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:	
2 FILER NAME <i>Nelda Wells Spears</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>2-13-08</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Amie Rodnick</i>	7 Amount of contribution (\$) <i>\$ 25.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>3017 Hatley Dr. Austin, TX 78746</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>2-08-08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Mark & Maureen Schwartz</i>	Amount of contribution (\$) <i>\$100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1803 Stamford Lane Austin, TX 78703</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2-01-08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Linda Moore Smith</i>	Amount of contribution (\$) <i>\$30.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>4906 Broadhill Dr. Austin, TX 78723</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2-07-08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Helen Spear</i>	Amount of contribution (\$) <i>\$ 50.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2615 Peecos Austin, TX 78703</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2-07-08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Chad + Linda Swedberg</i>	Amount of contribution (\$) <i>\$ 100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>12975 Trails End Austin, TX 78737</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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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:	
2 FILER NAME <i>Nelda Wells Spears</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>2-20-08</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Nancy C. Thompson</i> 6 Contributor address; City; State; Zip Code <i>4703 Broadhill Dr. Austin, TX 78723</i>	7 Amount of contribution (\$) <i>\$ 25.00</i>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>2-07-08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Larry Tucker</i> Contributor address; City; State; Zip Code <i>2210 White Dove Pass Austin, TX 78734</i>	Amount of contribution (\$) <i>\$ 100.00</i>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2-12-08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Vinson & Elkins</i> Contributor address; City; State; Zip Code	Amount of contribution (\$) <i>\$ 500.00</i>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2-07-08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>James R. Waddington</i> Contributor address; City; State; Zip Code <i>502 W. 13th Street Austin, TX 78701</i>	Amount of contribution (\$) <i>\$ 50.00</i>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2-07-08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Hillian Wicks</i> Contributor address; City; State; Zip Code <i>2501 Givens Ave. Austin, TX 78722</i>	Amount of contribution (\$) <i>\$ 200.00</i>	In-kind contribution description (if applicable)
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:	
2 FILER NAME <i>Nelda Wells Spears</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>2-02-08</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Shannon Noble</i>	7 Amount of contribution (\$) <i>\$ 100.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>2808 Rock Terrace Dr. Austin, TX 78704</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>2-03-08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Terrell Blodgett</i>	Amount of contribution (\$) <i>\$ 50.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1801 Lavaca St., #13-E Austin, TX 78701</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2-03-08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Daniel Byrne</i>	Amount of contribution (\$) <i>\$ 100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>98 San Jacinto Blvd, Ste. 2000 Austin, TX 78701</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2-03-08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Beverly Nation</i>	Amount of contribution (\$) <i>\$250.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>3120 Above Stratford Place Austin, TX 78746</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2-04-08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Steve Bickerstaff</i>	Amount of contribution (\$) <i>\$100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>7705 Merrybrook Austin, TX 78731</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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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:	
2 FILER NAME <i>Nelda Wells Spears</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>2-04-08</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>James McCormack</i>	7 Amount of contribution (\$) <i>\$250.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>9804 Scenic Bluff Dr. Austin, TX 78733</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>2-05-08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Christopher Bjornson</i>	Amount of contribution (\$) <i>\$100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>770 North Vermont St. Arlington, VA 22203</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2-06-08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Charles Draper</i>	Amount of contribution (\$) <i>\$100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>4609 Trail Crest Circle Austin, TX 78705</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2-06-08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Jim Bishop</i>	Amount of contribution (\$) <i>\$100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>167 Richards Lane Buda, TX 78610</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2-09-08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Mary Pillard</i>	Amount of contribution (\$) <i>\$500.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>10509 Thomaswoods Lane Austin, TX 78736</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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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:	
2 FILER NAME <i>Nelda Wells Spears</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>2-09-08</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Jaqueline Wittmuss</i>	7 Amount of contribution (\$) <i>\$500.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>P.O. Box 90536 Austin, TX 78709</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>2-10-08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Marcy E. Holloway</i>	Amount of contribution (\$) <i>\$ 25.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>P.O. Box 1115 Dripping Springs, TX 78620</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2-10-08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Eric Narcisse</i>	Amount of contribution (\$) <i>\$ 75.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>3101 Wells Branch Pkwy., Apt. 923 Austin, TX 78728</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2-11-08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Barbara Qualls</i>	Amount of contribution (\$) <i>\$ 150.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>33 Oaks Place Lago Vista, TX 78645</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2-12-08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Joanne Doherty</i>	Amount of contribution (\$) <i>\$1,000.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>5722 Longpoint Rd. Burton, TX 77835</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
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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:	
2 FILER NAME Nelda Wells Spears		3 ACCOUNT # (Ethics Commission filers)	
4 Date 2-13-08	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mike Willatt 6 Contributor address; City; State; Zip Code 2001 North Lamar Austin, TX 78705	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)	
(If travel outside of Texas, complete Schedule T)			
Date 2-15-08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toni Hunter Contributor address; City; State; Zip Code 1603 Barnswallow Austin, TX 78746	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T)			
Date 2-15-08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wesley Peoples Contributor address; City; State; Zip Code 7511 Fireoak Drive Austin, TX 78759	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T)			
Date 2-15-08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mikal Grimes Contributor address; City; State; Zip Code 700 W. 32nd St. Austin, TX 78705	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T)			
Date 2-22-08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alan Cirota Contributor address; City; State; Zip Code 1515 W. 5th St. Austin, TX 78703	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T)			

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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:	
2 FILER NAME		3 ACCOUNT # (Ethics Commission filers)	
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
2-22-08	Elaine Casas 6 Contributor address; City; State; Zip Code 11825 Blairview Austin, TX 78748	\$50.00	
		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
2-22-08	Perta Cavazos Contributor address; City; State; Zip Code 1202 Tuffit Lane Austin, TX 78753	\$50.00	
		(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#: _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
2-22-08	Garry W. Craighead Contributor address; City; State; Zip Code 8500 Shoal Creek Austin, TX 78758	\$800.00	
		(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#: _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
2-22-08	Bert Handcox Contributor address; City; State; Zip Code 5202 Rambling Range Austin, TX 78727	\$100.00	
		(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#: _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
2-22-08	John + Mary Hall Contributor address; City; State; Zip Code 8600 Young Lane Austin, TX 78737	\$500.00	
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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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:	
2 FILER NAME <i>Nelda Wells Spears</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>2-22-08</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Louis Henna</i>	7 Amount of contribution (\$) <i>\$ 500.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>9011 Atwater Cove Austin, TX 78733</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>2-22-08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Mack Martinez</i>	Amount of contribution (\$) <i>\$ 50.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>Contributor address; Austin, TX 78735</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2-22-08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Frank McIntire</i>	Amount of contribution (\$) <i>\$ 50.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>5604 SW Parkway #1723 Austin, TX 78735</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2-22-08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Diana Olmstead</i>	Amount of contribution (\$) <i>\$100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1301 W. Koenig Ln. Austin, TX 78756</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2-22-08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>William Snell</i>	Amount of contribution (\$) <i>\$ 200.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1515 W. 5th Austin, TX 78703</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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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:	
2 FILER NAME		3 ACCOUNT # (Ethics Commission filers)	
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
2-21-08	RECA Good Gov't. PAC 6 Contributor address; City; State; Zip Code 98 San Jacinto, Ste. 180 Austin, TX 78701	\$2,500.00	
		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
2-22-08	Terry Scarborough Contributor address; City; State; Zip Code 111 Congress Ave., Ste. 500	\$250.00	
		(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#: _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
2-22-08	Linda Young Contributor address; City; State; Zip Code 7000 Timarou Ter. Austin, TX 78754	\$250.00	
		(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#: _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code		
		(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#: _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code		
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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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 <i>Nelda Wells Spears</i>		3 ACCOUNT # (Ethics Commission filers)
4 Date <i>1-25-08</i>	5 Payee name <i>Rudolph Malveaux</i> 6 Payee address; City; State; Zip Code <i>2703 Manor Rd, #101 Austin, TX 78722</i>	7 Amount (\$) <i>\$500.00</i>
8 Purpose of payment (See instructions regarding type of information required.) <i>Campaign Consultant Services</i> (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 <i>1-27-08</i>	Payee name <i>Black Diamond Field Services</i> Payee address; City; State; Zip Code <i>1508 Shady Creek Tr. Cedar Park, TX 78613</i>	Amount (\$) <i>\$1,884.32</i>
Purpose of payment (See instructions regarding type of information required.) <i>Load, move, place 4x8 signs.</i> (If travel outside of Texas, complete Schedule T)		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date <i>1-29-08</i>	Payee name <i>Rudolph Malveaux</i> Payee address; City; State; Zip Code <i>2703 Manor Rd, #101 Austin, TX 78722</i>	Amount (\$) <i>\$97.04</i>
Purpose of payment (See instructions regarding type of information required.) <i>Reimbursement for sign supplies.</i> (If travel outside of Texas, complete Schedule T)		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date <i>1-29-08</i>	Payee name <i>Ace Printing</i> Payee address; City; State; Zip Code <i>7807 Doneaster Austin, TX 78745</i>	Amount (\$) <i>\$419.50</i>
Purpose of payment (See instructions regarding type of information required.) <i>Installment payment, sign printing.</i> (If travel outside of Texas, complete Schedule T)		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held

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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 Nelda Wells Spears		3 ACCOUNT # (Ethics Commission filers)
4 Date 1-30-08	5 Payee name Rudolph Malveaux 6 Payee address; City; State; Zip Code 2703 Manor Rd., #101 Austin, TX 78722	7 Amount (\$) \$ 500.00
8 Purpose of payment (See instructions regarding type of information required.) Campaign Consultant Services (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 2-06-08 1-31-08	Payee name Rudolph Malveaux Payee address; City; State; Zip Code 2703 Manor Rd., #101 Austin, TX 78722	Amount (\$) \$ 125.00
Purpose of payment (See instructions regarding type of information required.) Misc. Supplies for Fundraising Event. (If travel outside of Texas, complete Schedule T)		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 2-06-08	Payee name Miller Blueprint Payee address; City; State; Zip Code 501 W. 6th St. Austin, TX 78701	Amount (\$) \$ 287.14
Purpose of payment (See instructions regarding type of information required.) Sponsor Boards, Reprographics (If travel outside of Texas, complete Schedule T)		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 2-26-08	Payee name H.E.B. Payee address; City; State; Zip Code 7112 Ed. Bluestein Austin, TX 78723	Amount (\$) \$ 308.93
Purpose of payment (See instructions regarding type of information required.) Food items and supplies for event. (If travel outside of Texas, complete Schedule T)		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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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 <i>Nelda Wells Spears</i>		3 ACCOUNT # (Ethics Commission filers)
4 Date <i>2-08-08</i>	5 Payee name <i>Mal Davis</i> 6 Payee address; City; State; Zip Code <i>7221 Hillcroft Austin, TX 78724</i>	7 Amount (\$) <i>\$ 300.00</i>
8 Purpose of payment (See instructions regarding type of information required.) <i>Music-entertainment for event</i> (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 <i>2-08-08</i>	Payee name <i>Acc. Printing</i> Payee address; City; State; Zip Code <i>7807 Doncaster Austin, TX 78745</i>	Amount (\$) <i>\$ 419.50</i>
Purpose of payment (See instructions regarding type of information required.) <i>Installment Payment for sign printing.</i> (If travel outside of Texas, complete Schedule T)		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date <i>2-08-08</i>	Payee name <i>Rudolph Malveaux</i> Payee address; City; State; Zip Code <i>2703 Manor Rd., #101 Austin, TX 78722</i>	Amount (\$) <i>\$ 750.00</i>
Purpose of payment (See instructions regarding type of information required.) <i>Campaign Consultant Services</i> (If travel outside of Texas, complete Schedule T)		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date <i>2-13-08</i>	Payee name <i>The Home Depot</i> Payee address; City; State; Zip Code <i>7211 N. IH-35 Austin, TX 78752</i>	Amount (\$) <i>\$ 92.97</i>
Purpose of payment (See instructions regarding type of information required.) <i>Stakes for yard signs.</i> (If travel outside of Texas, complete Schedule T)		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED		

POLITICAL EXPENDITURES

SCHEDULE F

The instruction Guide explains how to complete this form.		1 Total pages Schedule F:
2 FILER NAME <i>Nelda Wells Spears</i>		3 ACCOUNT # (Ethics Commission filers)
4 Date <i>2-15-08</i>	5 Payee name <i>Fero Hewitt Global</i> 6 Payee address; City; State; Zip Code <i>700 Rio Grande, 2nd. Fl. Austin, TX 78701</i>	7 Amount (\$) <i>\$7,250.00</i>
8 Purpose of payment (See instructions regarding type of information required.) <i>Video Production + TV Buy</i> (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 <i>2-20-08</i>	Payee name <i>Rudolph Malveaux</i> Payee address; City; State; Zip Code <i>2703 Manor Rd. #101 Austin, TX 78722</i>	Amount (\$) <i>\$194.53</i>
Purpose of payment (See instructions regarding type of information required.) <i>Reimbursement for Stakes</i> (If travel outside of Texas, complete Schedule T)		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date <i>2-20-08</i>	Payee name <i>Fero Hewitt Global</i> Payee address; City; State; Zip Code <i>700 Rio Grande, 2nd floor Austin, TX 78701</i>	Amount (\$) <i>\$5,000.00</i>
Purpose of payment (See instructions regarding type of information required.) <i>Additional Medic Purchase</i> (If travel outside of Texas, complete Schedule T)		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date <i>2-23-08</i>	Payee name <i>Ace Printing</i> Payee address; City; State; Zip Code <i>7807 Doncaster Austin, TX 78745</i>	Amount (\$) <i>\$420.00</i>
Purpose of payment (See instructions regarding type of information required.) <i>Installment payment, sign printing</i> (If travel outside of Texas, complete Schedule T)		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED