

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
<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	\$	348.00
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2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	26,923.00
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EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$	394.26
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4. TOTAL POLITICAL EXPENDITURES	\$	98,786.43
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CONTRIBUTION BALANCE

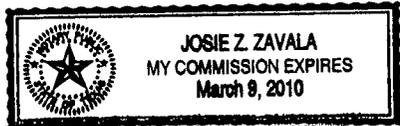
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	100,207.17
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OUTSTANDING LOAN TOTALS

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



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 27th day of October, 2008, to certify which, witness my hand and seal of office.

Josie Z. Zavala
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: 1/10 Report: 3/21	
2 FILER NAME Daugherty, Gerald		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 10/06/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) A/TCEMS Employee Association PAC 6 Contributor address; City; State; Zip Code 400 W 14th St Ste 230 Austin, TX 78701-1644	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 10/18/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Abyad, Tony 6 Contributor address; City; State; Zip Code 2524 Westgate St Houston, TX 77019-6610	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 10/22/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Arbuckle, Tom (Mr.) 6 Contributor address; City; State; Zip Code PO Box 14103 Austin, TX 78761-4103	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 10/01/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Austin Premium Property Management Company 6 Contributor address; City; State; Zip Code 8310 Club Ridge Dr Austin, TX 78735-1615	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 10/08/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Barron, Michael M. 6 Contributor address; City; State; Zip Code 108 Ridgmont Ct Austin, TX 78746-5498	7 Amount of contribution (\$) \$150.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) attorney		10 Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/10 Report: 4/21	
2 FILER NAME Daugherty, Gerald		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 10/14/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Baxter, William J. Jr. 6 Contributor address; City; State; Zip Code 2300 Barton Creek Blvd Apt 16 Austin, TX 78735-1685	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/09/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Beck, Ken Contributor address; City; State; Zip Code 15911 Booth Cir Volente, TX 78641-9679	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/01/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Box, Richard A. (Dr.) Contributor address; City; State; Zip Code 2504 Spring Ln Austin, TX 78703-1743	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) D.D.S.		Employer (See Instructions)	
Date 10/22/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Callegari, Allison and Robert Contributor address; City; State; Zip Code 12220 Triple Creek Dr Dripping Springs, TX 78620-3704	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/14/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Coopwood, Thomas B. II Contributor address; City; State; Zip Code 6717 Valburn Dr Austin, TX 78731-1803	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
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: 3/10 Report: 5/21	
2 FILER NAME Daugherty, Gerald		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 10/22/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cornelius, Bobbie Jo and Tom 6 Contributor address; City; State; Zip Code 203 Lacey Ave Austin, TX 78746-4662	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
10/17/2008	Crow, Joe (Mr. and Mrs.) Contributor address; City; State; Zip Code 9402 Granada Hills Dr Austin, TX 78737-2528	\$100.00	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
10/13/2008	Dozier, Marian A. Contributor address; City; State; Zip Code 1 Nob Hill Cir West Lake Hills, TX 78746-3603	\$300.00	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
10/16/2008	Dryden, Kenny Contributor address; City; State; Zip Code 3303 Northland Dr Ste 212 Austin, TX 78731-4955	\$500.00	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
10/06/2008	Edwards, Faye S. Contributor address; City; State; Zip Code 8027 Chalk Knoll Dr Austin, TX 78735-1706	\$200.00	
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: 4/10 Report: 6/21	
2 FILER NAME Daugherty, Gerald		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 10/10/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hill Country Republican Women's PAC 6 Contributor address; City; State; Zip Code 7202 Smokey Hill Rd Austin, TX 78736-3029	7 Amount of contribution (\$) \$850.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/30/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Home Builders Association of Greater Austin HOMEPAAC Contributor address; City; State; Zip Code 7952 Anderson Sq Austin, TX 78757-8419	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/01/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kenney, Amy Contributor address; City; State; Zip Code 6812 Canon Wren Dr Austin, TX 78746-3803	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/09/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) King, Jeff (Mr. and Mrs.) Contributor address; City; State; Zip Code 46 Pascal Ln Austin, TX 78746-2555	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/17/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Klippert, Myron Contributor address; City; State; Zip Code 1917 Val Verde Austin, TX 78732-1961	Amount of contribution (\$) \$100.00	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: 6/10 Report: 8/21	
2 FILER NAME Daugherty, Gerald		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 10/23/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McCombs, B J 6 Contributor address; City; State; Zip Code PO Box Bh003 San Antonio, TX 78201-1268	7 Amount of contribution (\$) \$2,500.00	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) <input type="checkbox"/>			
Date 10/15/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McDaniel, Emmy Contributor address; City; State; Zip Code 702 Geyser Ave Pflugerville, TX 78660-4024	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) <input type="checkbox"/>			
Date 10/09/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mills, James H Contributor address; City; State; Zip Code PO Box 411 Georgetown, TX 78627-0411	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 10/04/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morrison, Suzy Contributor address; City; State; Zip Code 100 Lido Cir Apt B1 Lakeway, TX 78734-5107	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) <input type="checkbox"/>			
Date 10/22/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Noble, William Contributor address; City; State; Zip Code 40 N Interstate 35 Apt 6c3 Austin, TX 78701-4355	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) <input type="checkbox"/>			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/10 Report: 9/21	
2 FILER NAME Daugherty, Gerald		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 10/01/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Preece, Forrest Jr. (Mr.) 6 Contributor address; City; State; Zip Code 360 Nueces St # 1005 Austin, TX 78701-3826	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
9 Principal occupation / Job title (See Instructions) President - Consultant		10 Employer (See Instructions)	
Date 10/14/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Republican Club of Austin PAC Contributor address; City; State; Zip Code 401 W 15th St Ste 850 Austin, TX 78701-1669	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/22/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Schneider, John P. Jr. (Dr.) Contributor address; City; State; Zip Code 3703 Speedway Austin, TX 78705-1523	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/11/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Schultz, William D. Contributor address; City; State; Zip Code PO Box 684309 Austin, TX 78768-4309	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/15/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Kent Contributor address; City; State; Zip Code 5304 Magdalena Dr Austin, TX 78735-6377	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
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: 8/10 Report: 10/21	
2 FILER NAME Daugherty, Gerald		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 10/20/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Stephen 6 Contributor address; City; State; Zip Code 8800 Appaloosa Run Austin, TX 78737-4013	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 10/11/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Solomon, Chris M. 6 Contributor address; City; State; Zip Code 4110 Rimrock Dr Lago Vista, TX 78645-6136	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
4 Date 10/06/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Spradlin, Jack 6 Contributor address; City; State; Zip Code 6210 Indian Canyon Dr Austin, TX 78746-6352	7 Amount of contribution (\$) \$125.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
4 Date 10/10/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stackable, Lynn 6 Contributor address; City; State; Zip Code 13403 Briar Hollow Dr Austin, TX 78729-2856	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
4 Date 09/30/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tanner-Jacobs Group LLC 6 Contributor address; City; State; Zip Code 3606 John Simpson Trl Austin, TX 78732-2239	7 Amount of contribution (\$) \$250.00	8 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: 9/10 Report: 11/21	
2 FILER NAME Daugherty, Gerald		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 10/22/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) The Reserve at Lake Travis 6 Contributor address; City; State; Zip Code 12117 Bee Caves Rd Ste 240 Bee Cave, TX 78738-5390	7 Amount of contribution (\$) \$5,100.00	8 In-kind contribution description (if applicable) Event Food, Beverage and Music (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/10/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Treybig, James (Mr.) Contributor address; City; State; Zip Code 10915 Bee Caves Rd Austin, TX 78733-5914	Amount of contribution (\$) \$700.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/09/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Villa Antonia LLC Contributor address; City; State; Zip Code 19039 Adrian Way Jonestown, TX 78645-9605	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/22/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wilhite, Phillip E. (Mr.) Contributor address; City; State; Zip Code 5326 Western Hills Dr Austin, TX 78731-4853	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/07/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wittenburg and Associates LLC Contributor address; City; State; Zip Code 6616 Tasajillo Trl Austin, TX 78739-1482	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
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: 10/10 Report: 12/21

2 FILER NAME Daugherty, Gerald**3** ACCOUNT # (Ethics Commission filers)

00000001

4 Date

10/11/2008

5 Full name of contributor out-of-state PAC (ID# _____)
Wong, Mitchell M.D.**6** Contributor address; City; State; Zip Code
1009 E 40th St Ste 200
Austin, TX 78751-4812**7** Amount of
contribution (\$)

\$500.00

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)

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/7 Report: 13/21
2 FILER NAME Daugherty, Gerald		3 ACCOUNT # (Ethics Commission filers) 00000001
4 Date 10/06/2008	5 Payee name Ampro Productions 6 Payee address; City; State; Zip Code 7202 Smokey Hill Rd Austin, TX 78736-3029	7 Amount (\$) \$2,763.67
8 Purpose of payment (See instructions regarding type of information required.) Printing (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 09/29/2008	Payee name Corazon Payee address; City; State; Zip Code 1101 W 5th St Austin, TX 78703-5301	Amount (\$) \$56.93
Purpose of payment (See instructions regarding type of information required.) Business Meeting (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 10/10/2008	Payee name Daugherty, Gerald Payee address; City; State; Zip Code 1403 Club Ridge Cove Austin, TX 78735	Amount (\$) \$691.00
Purpose of payment (See instructions regarding type of information required.) Reimbursement for Schedule G Expenditures (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 10/24/2008	Payee name Daugherty, Gerald Payee address; City; State; Zip Code 1403 Club Ridge Cove Austin, TX 78735	Amount (\$) \$67.59
Purpose of payment (See instructions regarding type of information required.) Reimbursement for Schedule G Expenditures (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/7 Report: 14/21
2 FILER NAME Daugherty, Gerald		3 ACCOUNT # (Ethics Commission filers) 00000001
4 Date 10/24/2008	5 Payee name Daugherty, Gerald 6 Payee address; City; State; Zip Code 1403 Club Ridge Cove Austin, TX 78735	7 Amount (\$) \$1,263.38
8 Purpose of payment (See instructions regarding type of information required.) Reimbursement for Schedule G Expenditures (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 10/11/2008	Payee name Events by Emily Payee address; City; State; Zip Code 8210 Forest Heights Ln Austin, TX 78749-3502	Amount (\$) \$785.00
Purpose of payment (See instructions regarding type of information required.) Event Supplies (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 10/08/2008	Payee name FedEx Kinko's Payee address; City; State; Zip Code 9222 Burnet Rd Austin, TX 78758-5290	Amount (\$) \$162.38
Purpose of payment (See instructions regarding type of information required.) Copy Services (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 10/25/2008	Payee name Frink Inc. Advertising Payee address; City; State; Zip Code 8500 Bluffstone Cv Ste B101 Austin, TX 78759-7811	Amount (\$) \$20,000.00
Purpose of payment (See instructions regarding type of information required.) Media Services (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/7 Report: 15/21
2 FILER NAME Daugherty, Gerald		3 ACCOUNT # (Ethics Commission filers) 00000001
4 Date 10/16/2008	5 Payee name HEB Research 6 Payee address; City; State; Zip Code 10710 Research Blvd Ste 200 Austin, TX 78759-5780	7 Amount (\$) \$64.93
8 Purpose of payment (See instructions regarding type of information required.) Supplies (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 10/20/2008	Payee name Hill Country News Payee address; City; State; Zip Code 103 Woods Ln Cedar Park, TX 78613-6220	Amount (\$) \$666.00
Purpose of payment (See instructions regarding type of information required.) Advertising (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 10/08/2008	Payee name KC Strategies Payee address; City; State; Zip Code PO Box 80501 Austin, TX 78708-0501	Amount (\$) \$22,325.00
Purpose of payment (See instructions regarding type of information required.) Printing (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 10/22/2008	Payee name KC Strategies Payee address; City; State; Zip Code PO Box 80501 Austin, TX 78708-0501	Amount (\$) \$10,530.00
Purpose of payment (See instructions regarding type of information required.) Printing (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 4/7 Report: 16/21

2 FILER NAME Daugherty, Gerald

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date

10/20/2008

5 Payee name
Lake Travis View

6 Payee address; City; State; Zip Code
2300 Lohmans Crossing Road
Lakeway, TX 78734-6200

7 Amount
(\$)

\$2,131.85

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

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

(If travel outside of Texas, complete Schedule T)

Office sought:
Office held:

Date

10/18/2008

Payee name
McClendon, Carl

Payee address; City; State; Zip Code
4808 Canyonwood Dr
Austin, TX 78735-6639

Amount
(\$)

\$100.00

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

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

(If travel outside of Texas, complete Schedule T)

Office sought:
Office held:

Date

10/10/2008

Payee name
McCoy's

Payee address; City; State; Zip Code
6200 Burluson Rd.
Austin, TX 78744

Amount
(\$)

\$322.04

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

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

(If travel outside of Texas, complete Schedule T)

Office sought:
Office held:

Date

10/22/2008

Payee name
Myers, Alice

Payee address; City; State; Zip Code
809 Canyon Creek Dr
West Lake Hills, TX 78746-2826

Amount
(\$)

\$1,610.00

Purpose of payment (See instructions regarding type of information required.)
Compensation for Campaign Services

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

(If travel outside of Texas, complete Schedule T)

Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/7 Report: 17/21
2 FILER NAME Daugherty, Gerald		3 ACCOUNT # (Ethics Commission filers) 00000001
4 Date 10/14/2008	5 Payee name North Lake Travis LOG 6 Payee address; City; State; Zip Code 20811 Dawn Dr Lago Vista, TX 78645-5213	7 Amount (\$) \$988.75
8 Purpose of payment (See instructions regarding type of information required.) Advertising (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 10/12/2008	Payee name Oak Hill Gazette Payee address; City; State; Zip Code 7200-B Hwy 71 W. Austin, TX 78735	Amount (\$) \$780.00
Purpose of payment (See instructions regarding type of information required.) Advertising (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 10/13/2008	Payee name Paragon Printing Payee address; City; State; Zip Code 10423 Mckalla Pl Austin, TX 78758-4448	Amount (\$) \$781.46
Purpose of payment (See instructions regarding type of information required.) Printing (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 09/26/2008	Payee name PayPal Payee address; City; State; Zip Code PO Box 45050 Omaha, NE 68145-0050	Amount (\$) \$58.30
Purpose of payment (See instructions regarding type of information required.) Fees (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 6/7 Report: 18/21**2** FILER NAME Daugherty, Gerald**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date

10/17/2008**5** Payee name
PostNet**7** Amount
(\$)

\$260.32

6 Payee address; City; State; Zip Code
3720 Gattis School Rd Ste 800
Round Rock, TX 78664-4660**8** Purpose of payment (See instructions regarding type of information required.)
Printing**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:(If travel outside of Texas, complete Schedule T)

Date

Payee name
Sam's ClubAmount
(\$)

10/16/2008

\$107.39

Payee address; City; State; Zip Code
9700 N. Cap. Of Tx Hwy
Austin, TX 78759Purpose of payment (See instructions regarding type of information required.)
Supplies**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:(If travel outside of Texas, complete Schedule T)

Date

Payee name
Strategic Media Placement Inc.Amount
(\$)

10/22/2008

\$20,000.00

Payee address; City; State; Zip Code
7669 Stagers Loop
Delaware, OH 43015-7010Purpose of payment (See instructions regarding type of information required.)
Media Services**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:(If travel outside of Texas, complete Schedule T)

Date

Payee name
The Strategy Group for Media, Inc.Amount
(\$)

10/09/2008

\$4,500.00

Payee address; City; State; Zip Code
7669 Stagers Loop
Delaware, OH 43015-7010Purpose of payment (See instructions regarding type of information required.)
Media Services**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:(If travel outside of Texas, complete Schedule T)

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/7 Report: 19/21
2 FILER NAME Daugherty, Gerald		3 ACCOUNT # (Ethics Commission filers) 00000001
4 Date 10/22/2008	5 Payee name The Strategy Group for Media, Inc. 6 Payee address; City; State; Zip Code 7669 Stagers Loop Delaware, OH 43015-7010	7 Amount (\$) \$5,000.00
8 Purpose of payment (See instructions regarding type of information required.) Media Services (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 10/17/2008	Payee name United States Postal Service - Balcones Station Payee address; City; State; Zip Code 11900 Jollyville Rd Austin, TX 78759-2304	Amount (\$) \$378.60
Purpose of payment (See instructions regarding type of information required.) Postage (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 10/24/2008	Payee name Vera, Bobby Payee address; City; State; Zip Code 1111 Southcreek Dr Apt 1114 Round Rock, TX 78664-7172	Amount (\$) \$250.00
Purpose of payment (See instructions regarding type of information required.) Sign Work (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** 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: 1/2 Report: 20/21

2 FILER NAME Daugherty, Gerald

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date	5 Payee name	8 Amount (\$)
10/19/2008	HEB <hr/> Payee address; City; State; Zip Code 12400 W Highway 71 Bee Cave, TX 78738-6517 <hr/> Purpose of expenditure (See instructions regarding type of information required.) Gas (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	\$58.61 <input type="checkbox"/> Reimbursement from political contributions intended
10/06/2008	Macaroni Grill - Great Hills <hr/> Payee address; City; State; Zip Code 9828 Great Hills Trail Austin, TX 78759 <hr/> Purpose of expenditure (See instructions regarding type of information required.) Business Meeting (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	\$120.00 <input type="checkbox"/> Reimbursement from political contributions intended
10/12/2008	Macaroni Grill - Great Hills <hr/> Payee address; City; State; Zip Code 9828 Great Hills Trail Austin, TX 78759 <hr/> Purpose of expenditure (See instructions regarding type of information required.) Business Meeting (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	\$95.00 <input type="checkbox"/> Reimbursement from political contributions intended
10/20/2008	Macaroni Grill - West Lake <hr/> Payee address; City; State; Zip Code 701 S Capital Of Texas Hwy West Lake Hills, TX 78746-5243 <hr/> Purpose of expenditure (See instructions regarding type of information required.) Business Meeting (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	\$154.53 <input type="checkbox"/> Reimbursement from political contributions intended
10/14/2008	McPhail's Florist <hr/> Payee address; City; State; Zip Code 605 Barton Springs Rd Austin, TX 78704-1144 <hr/> Purpose of expenditure (See instructions regarding type of information required.) Thank You Flowers for Volunteers (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	\$261.97 <input type="checkbox"/> Reimbursement from political contributions intended

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/2 Report: 21/21
2 FILER NAME Daugherty, Gerald		3 ACCOUNT # (Ethics Commission filers) 00000001
4 Date 10/13/2008	5 Payee name Mimi's Cafe Bee Cave 6 Payee address; City; State; Zip Code 12613 Galleria Circle Bee Cave, TX 78738 7 Purpose of expenditure (See instructions regarding type of information required.) Business Meeting (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	8 Amount (\$) \$51.00 <input type="checkbox"/> Reimbursement from political contributions intended
Date 10/02/2008	Payee name Suzi's China Grill Payee address; City; State; Zip Code 2745 Bee Cave Rd # 10 Austin, TX 78746-5640 Purpose of expenditure (See instructions regarding type of information required.) Business Meeting (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	Amount (\$) \$54.00 <input type="checkbox"/> Reimbursement from political contributions intended
Date 10/01/2008	Payee name The Roaring Fork Payee address; City; State; Zip Code 701 Congress Austin, TX 78701-3216 Purpose of expenditure (See instructions regarding type of information required.) Business Meeting (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	Amount (\$) \$176.00 <input type="checkbox"/> Reimbursement from political contributions intended
Date 10/06/2008	Payee name Threadgill's Payee address; City; State; Zip Code 301 W. Riverside Austin, TX 78704 Purpose of expenditure (See instructions regarding type of information required.) Business Meeting (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	Amount (\$) \$85.47 <input type="checkbox"/> Reimbursement from political contributions intended
Date 10/04/2008	Payee name Vera, Bobby Payee address; City; State; Zip Code 1111 Southcreek Dr Apt 1114 Round Rock, TX 78664-7172 Purpose of expenditure (See instructions regarding type of information required.) Sign Work (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	Amount (\$) \$691.00 <input type="checkbox"/> Reimbursement from political contributions intended