

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

7000

FORM C/OH COVER SHEET PG 1

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

1 ACCOUNT #
(Ethics Commission filers)
00000001

2 PAGE #
1 of 16

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR FIRST MI
 Gerald
.....
NICKNAME LAST SUFFIX
 Daugherty

OFFICE USE ONLY

Date Received

Date Hand-delivered or Date Postmarked

Receipt #

Amfouht

Date Processed

Date Imaged

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
1403 Club Ridge Cove
Austin, TX 78735

Change of Address

5 CAMPAIGN TREASURER NAME

MS / MRS / MR FIRST MI
 Hector
.....
NICKNAME LAST SUFFIX
 DeLeon

6 CAMPAIGN TREASURER ADDRESS
(Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
221 W 6th St 1050
Austin, TX 78701

7 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION
(512) 478-5308

8 REPORT TYPE

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

9 PERIOD COVERED

Month Day Year THROUGH Month Day Year
10/26/2008 12/31/2008

10 ELECTION

ELECTION DATE ELECTION TYPE
Month Day Year Primary Runoff General Special
11/04/2008

11 OFFICE

OFFICE HELD (if any)
Travis Co Commissioner, Pct. 3

12 OFFICE SOUGHT (if known)
Travis Co Commissioner, Pct. 3

13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS

.. Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ..

Name

Address/PO Box; Apt. / Suite #; City; State; Zip Code

additional pages

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME Daugherty, Gerald

15 ACCOUNT # (Ethics Commission filers)
00000001

16 NOTICE FROM POLITICAL COMMITTEE(S)

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

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

17 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 225.00
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2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 8,565.00
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EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ 527.84
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4. TOTAL POLITICAL EXPENDITURES	\$ 19,428.86
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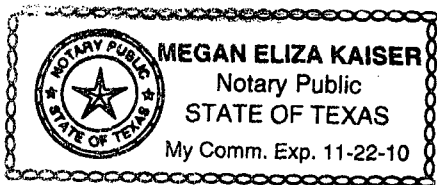
CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 53,210.86
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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 13 day of Jan, 2008, to certify which, witness my hand and seal of office.

Megan E. Kaiser
Signature of officer administering oath

Megan E. Kaiser
Print name of officer administering oath

Notary Public
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: 1/5 Report: 3/16	
2 FILER NAME Daugherty, Gerald		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 11/05/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bench, John K. (Mr. and Mrs.) 6 Contributor address; City; State; Zip Code 14 Applegreen Ln The Hills, TX 78738-1440	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
11/05/2008	BMcPAC Contributor address; City; State; Zip Code 111 Congress Ave Ste 1400 Austin, TX 78701-4093	\$1,500.00	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
10/28/2008	Bruinsma, Robert Contributor address; City; State; Zip Code 11675 Jollyville Rd Ste 102 Austin, TX 78759-4105	\$250.00	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
11/05/2008	Burdette, Milo Contributor address; City; State; Zip Code 1103 Meriden Ln Austin, TX 78703-3824	\$250.00	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
11/08/2008	Caffrey, James P. Contributor address; City; State; Zip Code 6417 Wallace Cv Austin, TX 78750-8244	\$100.00	
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: 2/5 Report: 4/16	
2 FILER NAME Daugherty, Gerald			3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 10/27/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Coleman, Ann 6 Contributor address; City; State; Zip Code 9890 Silver Mountain Dr Austin, TX 78737-3103	7 Amount of contribution (\$) \$250.00	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 11/05/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Collyer-Potter, Sue Contributor address; City; State; Zip Code 307 Crane St Austin, TX 78734-4745	Amount of contribution (\$) \$200.00	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 10/27/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Coneway, C. R. Jr. (Mr. and Mrs.) Contributor address; City; State; Zip Code 8701 Bluecreek Cv Austin, TX 78735-1431	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) Vice-President			Employer (See Instructions)	
Date 11/03/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Courter, Stephen Contributor address; City; State; Zip Code 37 Pascal Ln Austin, TX 78746-3205	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 11/05/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dettman, Greg (Mr. and Mrs.) Contributor address; City; State; Zip Code 10208 Ranch Road 620 N Austin, TX 78726-2214	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: 3/5 Report: 5/16	
2 FILER NAME Daugherty, Gerald		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 11/05/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Flores, Manuel L. Jr. (Mr. and Mrs.) 6 Contributor address; City; State; Zip Code 2904 Navidad Cv Austin, TX 78735-1439	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions)			
Date 11/05/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hampton, Gary W. Contributor address; City; State; Zip Code 2773 Tradewind Dr Spicewood, TX 78669-5131	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date 10/26/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hartman, Wayne P. Contributor address; City; State; Zip Code 12881 Park Dr Austin, TX 78732-1841	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date 11/05/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Johnson, Brenda Vickrey Contributor address; City; State; Zip Code 2 Lake Bridge Dr San Antonio, TX 78248-1024	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date 10/29/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martin, Andrew Contributor address; City; State; Zip Code 6305 Walebridge Ln Austin, TX 78739-1571	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/5 Report: 6/16	
2 FILER NAME Daugherty, Gerald		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 10/27/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Meade, Nikelle S. 6 Contributor address; City; State; Zip Code 5363 Austral Loop Austin, TX 78739-1715	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 11/05/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Oles, C. Patrick Contributor address; City; State; Zip Code 2109 Rockmoor Ave Austin, TX 78703-2034	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/03/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reid, Glen Contributor address; City; State; Zip Code 1305 Carlotta Ln Austin, TX 78733-1532	Amount of contribution (\$) \$190.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/27/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Roche, David L. Contributor address; City; State; Zip Code 1600 Mount Larson Rd Austin, TX 78746-2956	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/30/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Thompson, Dwight Contributor address; City; State; Zip Code 5450 Bee Cave Rd Ste 3c West Lake Hills, TX 78746-5251	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: 5/5 Report: 7/16	
2 FILER NAME Daugherty, Gerald		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 11/03/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Timmerman, Timothy 6 Contributor address; City; State; Zip Code 4903 Whitethorn Ct Austin, TX 78746-1557	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) <input type="checkbox"/>			
Date 11/27/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wallace, Marian K. Contributor address; City; State; Zip Code 5004 Tiger Lily Way Austin, TX 78739-1431	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 10/30/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Walls, Eliza and Clyde Contributor address; City; State; Zip Code 4504 Wild Dunes Ct Austin, TX 78747-1302	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 11/27/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wheeler, Richard C. Contributor address; City; State; Zip Code 1903a Crested Butte Dr Austin, TX 78746-7669	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"/>			

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/8 Report: 8/16

2 FILER NAME Daugherty, Gerald

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date 11/12/2008	5 Payee name Anyatonwu, Hosanna	7 Amount (\$) \$110.00
	6 Payee address; City; State; Zip Code 10202 Doc Holliday Trl Austin, TX 78753-3747	

8 Purpose of payment (See instructions regarding type of information required.) Compensation for Campaign Work (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:
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Date 11/06/2008	Payee name Austintrends	Amount (\$) \$707.50
	Payee address; City; State; Zip Code 7101 W Highway 71 Ste 213 Austin, TX 78735-8329	

Purpose of payment (See instructions regarding type of information required.) Customized Data Processing for Mail Piece (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:
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Date 11/12/2008	Payee name Barrones, Karla	Amount (\$) \$80.00
	Payee address; City; State; Zip Code 1916 Cornell St Apt 101 Austin, TX 78702-2847	

Purpose of payment (See instructions regarding type of information required.) Compensation for Campaign 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:
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Date 11/12/2008	Payee name Benitez, Ivan	Amount (\$) \$60.00
	Payee address; City; State; Zip Code 5111 Loyola Ln Austin, TX 78723-3943	

Purpose of payment (See instructions regarding type of information required.) Compensation for Campaign 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:
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POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 2/8 Report: 9/16**2** FILER NAME Daugherty, Gerald**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date

11/12/2008**5** Payee name
Cairo, Victoria

6 Payee address; City; State; Zip Code
1401 E Rundberg Ln Trlr 247
Austin, TX 78753-4905**7** Amount
(\$)

\$150.00**8** Purpose of payment (See instructions regarding type of information required.)
Compensation for Campaign Work**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

Payee name
Daugherty, GeraldAmount
(\$)

12/31/2008

Payee address; City; State; Zip Code
1403 Club Ridge Cove
Austin, TX 78735

\$599.54

Purpose of payment (See instructions regarding type of information required.)
Reimbursement for Schedule G Expenditures**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) Office sought:
Office held:

Date

Payee name
Davis, MeganAmount
(\$)

11/05/2008

Payee address; City; State; Zip Code
3111 Fort Worth Trl
Austin, TX 78748-1905

\$2,500.00

Purpose of payment (See instructions regarding type of information required.)
Compensation for Campaign Work**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) Office sought:
Office held:

Date

Payee name
Davis, MistieAmount
(\$)

12/31/2008

Payee address; City; State; Zip Code
6201 Colina Ln
Austin, TX 78759-4767

\$1,000.00

Purpose of payment (See instructions regarding type of information required.)
Compensation for Campaign Work**** 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: 3/8 Report: 10/16

2 FILER NAME Daugherty, Gerald

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date 11/12/2008	5 Payee name DeLeon, John 6 Payee address; City; State; Zip Code 5603 Kayview Dr Austin, TX 78749-2876	7 Amount (\$) \$60.00
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8 Purpose of payment (See instructions regarding type of information required.) Compensation for Campaign Work (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:
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Date 11/12/2008	Payee name Dieseldorf, Tristan Payee address; City; State; Zip Code 5400 Amanda Ellis Ct Austin, TX 78749-2182	Amount (\$) \$160.00
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Purpose of payment (See instructions regarding type of information required.) Compensation for Campaign 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:
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Date 11/12/2008	Payee name Dominguez, Amaris Payee address; City; State; Zip Code 1401 E Rundberg Ln Trlr 247 Austin, TX 78753-4905	Amount (\$) \$90.00
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Purpose of payment (See instructions regarding type of information required.) Compensation for Campaign 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:
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Date 11/12/2008	Payee name Flores, James Payee address; City; State; Zip Code 6201 Aviary Cv Austin, TX 78744-4558	Amount (\$) \$110.00
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Purpose of payment (See instructions regarding type of information required.) Compensation for Campaign 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:
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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 4/8 Report: 11/16

2 FILER NAME Daugherty, Gerald

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date 11/12/2008	5 Payee name Gipson, Vanessa 6 Payee address; City; State; Zip Code 12332 Thompkins Dr Austin, TX 78753-7016	7 Amount (\$) \$80.00
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8 Purpose of payment (See instructions regarding type of information required.) Compensation for Campaign Work (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:
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Date 11/12/2008	Payee name Herrera, Rosa Payee address; City; State; Zip Code 734 Pedernales St # B Austin, TX 78702-3949	Amount (\$) \$80.00
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Purpose of payment (See instructions regarding type of information required.) Compensation for Campaign 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:
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Date 11/12/2008	Payee name Katychev, Mikhail Payee address; City; State; Zip Code 6706 La Concha Pass Austin, TX 78749-1716	Amount (\$) \$80.00
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Purpose of payment (See instructions regarding type of information required.) Compensation for Campaign 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:
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Date 11/12/2008	Payee name Kim, Ko Payee address; City; State; Zip Code 2703 Pectoral Dr Austin, TX 78748-5139	Amount (\$) \$90.00
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Purpose of payment (See instructions regarding type of information required.) Compensation for Campaign 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:
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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 5/8 Report: 12/16

2 FILER NAME Daugherty, Gerald

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date 11/05/2008	5 Payee name Lehman, Lindsey	7 Amount (\$) \$90.00
	6 Payee address; City; State; Zip Code 1310 Fm 1626 Manchaca, TX 78652	

8 Purpose of payment (See instructions regarding type of information required.) Compensation for Campaign Work (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:
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Date 12/17/2008	Payee name Moore, Bob	Amount (\$) \$250.00
	Payee address; City; State; Zip Code 305 Inwood Rd Austin, TX 78746-5620	

Purpose of payment (See instructions regarding type of information required.) Compensation for Campaign 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:
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Date 11/12/2008	Payee name Ohabughiro, Darlene	Amount (\$) \$80.00
	Payee address; City; State; Zip Code PO Box 16527 Austin, TX 78761-6527	

Purpose of payment (See instructions regarding type of information required.) Compensation for Campaign 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:
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Date 10/30/2008	Payee name Paragon Printing	Amount (\$) \$6,270.19
	Payee address; City; State; Zip Code 10423 Mckalla Pl Austin, TX 78758-4448	

Purpose of payment (See instructions regarding type of information required.) Printing and Mailing (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:
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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/8 Report: 13/16
2 FILER NAME Daugherty, Gerald		3 ACCOUNT # (Ethics Commission filers) 00000001
4 Date 11/03/2008	5 Payee name Shack, Ed 6 Payee address; City; State; Zip Code 814 San Jacinto Blvd Ste 202 Austin, TX 78701-2510	7 Amount (\$) \$150.00
8 Purpose of payment (See instructions regarding type of information required.) Attorney Fees (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 11/03/2008	Payee name Slaughter Creek Reporter Payee address; City; State; Zip Code 4101 Reynosa Dr Austin, TX 78739-4342	Amount (\$) \$375.00
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 12/17/2008	Payee name Smith, Barbara Payee address; City; State; Zip Code 1200 Elm St Apt 206 Austin, TX 78703-4054	Amount (\$) \$250.00
Purpose of payment (See instructions regarding type of information required.) Compensation for Campaign 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:
Date 10/30/2008	Payee name Third Base Payee address; City; State; Zip Code 1717 W 6th St Austin, TX 78703-4773	Amount (\$) \$150.00
Purpose of payment (See instructions regarding type of information required.) Election Night Food & Beverage (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: 7/8 Report: 14/16

2 FILER NAME Daugherty, Gerald

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date	5 Payee name TRACPAC	7 Amount (\$)
11/14/2008	6 Payee address; City; State; Zip Code 10711 Burnet Rd Austin, TX 78758-4457	\$4,000.00

8 Purpose of payment (See instructions regarding type of information required.) Contribution (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:
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Date	Payee name Villarreal, Alison	Amount (\$)
11/12/2008	Payee address; City; State; Zip Code 11970 Jollyville Rd Apt 207 Austin, TX 78759-2321	\$60.00

Purpose of payment (See instructions regarding type of information required.) Compensation for Campaign 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:
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Date	Payee name Yiapan, Brio	Amount (\$)
11/12/2008	Payee address; City; State; Zip Code 4609 1/2 Harmon Ave Austin, TX 78751	\$80.00

Purpose of payment (See instructions regarding type of information required.) Compensation for Campaign 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:
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Date	Payee name Zamzow, Martin	Amount (\$)
11/24/2008	Payee address; City; State; Zip Code 14513 Ballyclarc Dr Austin, TX 78717-4410	\$616.59

Purpose of payment (See instructions regarding type of information required.) Compensation for Campaign 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:
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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 8/8 Report: 15/16

2 FILER NAME Daugherty, Gerald

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date

12/17/2008

5 Payee name
Zamzow, Martin

7 Amount
(\$)

\$250.00

6 Payee address; City; State; Zip Code
14513 Ballyclarc Dr
Austin, TX 78717-4410

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

9 ** 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 MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/1 Report: 16/16

2 FILER NAME Daugherty, Gerald

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date	5 Payee name	8 Amount (\$)
12/17/2008	Baby Acapulco Payee address; City; State; Zip Code 1628 Barton Spgs Austin, TX 78704-1035 Purpose of expenditure (See instructions regarding type of information required.) Business Meeting (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	\$57.00 <input type="checkbox"/> Reimbursement from political contributions intended
11/09/2008	County Line BBQ Payee address; City; State; Zip Code 6500 Bee Caves Rd Austin, TX 78746-5002 Purpose of expenditure (See instructions regarding type of information required.) Business Meeting (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	\$90.97 <input type="checkbox"/> Reimbursement from political contributions intended
10/30/2008	Macaroni Grill - West Lake Payee address; City; State; Zip Code 701 S Capital Of Texas Hwy West Lake Hills, TX 78746-5243 Purpose of expenditure (See instructions regarding type of information required.) Business Meeting (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	\$124.09 <input type="checkbox"/> Reimbursement from political contributions intended
11/20/2008	Macaroni Grill - West Lake Payee address; City; State; Zip Code 701 S Capital Of Texas Hwy West Lake Hills, TX 78746-5243 Purpose of expenditure (See instructions regarding type of information required.) Business Meeting (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	\$50.14 <input type="checkbox"/> Reimbursement from political contributions intended