

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

7051

FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers) 78000000	2 PAGE # 1 of 14
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR: Hon. FIRST: Gregory MI: _____ NICKNAME: Greg LAST: Hamilton SUFFIX: _____	<div style="text-align: center; border: 1px solid black; padding: 5px;"> OFFICE USE ONLY </div> <div style="font-size: small; text-align: center;"> Date Received: _____ Date Hand Delivered or Date Postmarked: _____ 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 PO Box 5674 Austin, TX 78763-5674		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR: Hon. FIRST: Gregory MI: _____ NICKNAME: Greg LAST: Hamilton SUFFIX: _____		
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1605 Augusta Bend Hutto, TX 78634-5387		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 797-4992		
8 REPORT TYPE	<input checked="" 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 type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> 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 Month Day Year 11/04/2008	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any) Sheriff, Travis County	12 OFFICE SOUGHT (if known) Sheriff, Travis County	
13 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**

14 C/OH NAME Hamilton, Gregory (Hon.)

15 ACCOUNT # (Ethics Commission filers)
78000000

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

\$ 50.00

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

\$ 7,250.00

EXPENDITURE TOTALS

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

\$ 126.23

4. TOTAL POLITICAL EXPENDITURES

\$ 12,847.18

CONTRIBUTION BALANCE

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

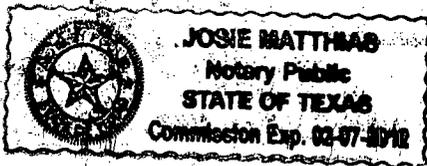
\$ 501.37

OUTSTANDING LOAN TOTALS

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

\$ 0.00

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.

Greg Hamilton
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Greg Hamilton, this the 15th day of January, 2009, to certify which, witness my hand and seal of office.

Josie Matthias
Signature of officer administering oath

Josie Matthias
Print name of officer administering oath

Notary
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/2 Report: 3/14

2 FILER NAME Hamilton, Gregory (Hon.)

3 ACCOUNT # (Ethics Commission filers)
78000000

4 Date
10/30/2008

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

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

\$500.00 |

6 Contributor address; City; State; Zip Code
400 W 14th St Ste B50
Austin, TX 78701

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date
11/04/2008

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

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

\$200.00 |

Contributor address; City; State; Zip Code
1013 Weeping Willow Dr
Austin, TX 78753

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
10/29/2008

Full name of contributor out-of-state PAC (ID# _____)
Call Phonograph, LLC

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

\$1,000.00 |

Contributor address; City; State; Zip Code
905 E 7th St
Austin, TX 78702

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
10/30/2008

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

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

\$400.00 |

Contributor address; City; State; Zip Code
2501 N Lamar Blvd
Austin, TX 78705

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
10/27/2008

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

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

\$1,000.00 |

Contributor address; City; State; Zip Code
2904 Mill Reef Cv
Austin, TX 78746

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 2/2 Report: 4/14

2 FILER NAME Hamilton, Gregory (Hon.)

3 ACCOUNT # (Ethics Commission filers)
78000000

4 Date
11/04/2008

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

7 Amount of contribution (\$) | **8** In-kind contribution description (if applicable)
\$3,000.00 |

6 Contributor address; City; State; Zip Code
6601 Vaught Ranch Rd Ste 200
Austin, TX 78730

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date
10/27/2008

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

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

Contributor address; City; State; Zip Code
2905 Mill Reef Cv
Austin, TX 78746

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
10/29/2008

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

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

Contributor address; City; State; Zip Code
10804 Pinehurst Dr # A
Austin, TX 78747

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/6 Report: 5/14

2 FILER NAME Hamilton, Gregory (Hon.)

3 ACCOUNT # (Ethics Commission filers)
78000000

4 Date

10/29/2008

5 Payee name
Burnet Road Self Storage

6 Payee address; City; State; Zip Code
6400 Burnet Rd
Austin, TX 78757

7 Amount (\$)

\$56.00

8 Purpose of payment (See instructions regarding type of information required.)
Storage for campaign signs

(If travel outside of Texas, complete Schedule T)

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

Office sought:
Office held:

Date

11/05/2008

Payee name
Crown Trophy of Austin

Payee address; City; State; Zip Code
9106 Bridle Ln
Austin, TX 78746

Amount (\$)

\$113.40

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

(If travel outside of Texas, complete Schedule T)

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

Office sought:
Office held:

Date

12/11/2008

Payee name
Evans, Herb

Payee address; City; State; Zip Code
1302 West Ave
Austin, TX 78701

Amount (\$)

\$148.30

Purpose of payment (See instructions regarding type of information required.)
Reimburse for sandwiches and sodas purchased for volunteers from La Madeleine on 11/ 10/2008

(If travel outside of Texas, complete Schedule T)

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

Office sought:
Office held:

Date

11/17/2008

Payee name
Fogo de Chao

Payee address; City; State; Zip Code
309 East 3rd St
Austin, TX 78701

Amount (\$)

\$850.39

Purpose of payment (See instructions regarding type of information required.)
Thank you dinner for campaign team

(If travel outside of Texas, complete Schedule T)

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

Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 2/6 Report: 6/14**2** FILER NAME Hamilton, Gregory (Hon.)**3** ACCOUNT # (Ethics Commission filers)
78000000**4** Date

11/13/2008**5** Payee name
Hamilton, Greg (Sheriff)**7** Amount
(\$)

\$315.95

6 Payee address; City; State; Zip Code
1605 Augusta Bend
Hutto, TX 78634**8** Purpose of payment (See instructions regarding type of information required.)

Partial reimbursement for out-of-pocket expenditures listed on this report

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

Office sought:

Office held:

Date

Payee name
IHOPAmount
(\$)

11/01/2008

Payee address; City; State; Zip Code
4118 S IH35
Austin, TX 78745

\$119.66

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

Breakfast with campaign supporters

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

Office sought:

Office held:

Date

Payee name
KTXZAmount
(\$)

10/26/2008

Payee address; City; State; Zip Code
9434 Parkfield Dr
Austin, TX 78758

\$2,000.00

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

Radio time for political ads

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

Office sought:

Office held:

Date

Payee name
L and R Meat MarketAmount
(\$)

11/04/2008

Payee address; City; State; Zip Code
118 N Penelope
Belton, TX 76513

\$150.00

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

BBQ for election-night party

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

Office sought:

Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 3/6 Report: 7/14**2** FILER NAME Hamilton, Gregory (Hon.)**3** ACCOUNT # (Ethics Commission filers)
78000000

4 Date 10/26/2008	5 Payee name La Voz Newspapers 6 Payee address; City; State; Zip Code PO Box 19457 Austin, TX 78760	7 Amount (\$) \$375.00
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8 Purpose of payment (See instructions regarding type of information required.) Newspaper ad (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 10/29/2008	Payee name Malveaux, Rudy Payee address; City; State; Zip Code 2703 Manor Rd #101 Austin, TX 78722	Amount (\$) \$1,030.00
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Purpose of payment (See instructions regarding type of information required.) Labor for yard signs, design, radio production/Entertainment at election-night party (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 11/07/2008	Payee name Malveaux, Rudy Payee address; City; State; Zip Code 2703 Manor Rd #101 Austin, TX 78722	Amount (\$) \$2,425.00
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Purpose of payment (See instructions regarding type of information required.) Yard sign labor, video production, ad design (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 NAACP-AUSTIN Payee address; City; State; Zip Code 1704 E 12th St Austin, TX 78702	Amount (\$) \$300.00
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Purpose of payment (See instructions regarding type of information required.) Program ad (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: 4/6 Report: 8/14

2 FILER NAME Hamilton, Gregory (Hon.)

3 ACCOUNT # (Ethics Commission filers)
78000000

4 Date

10/29/2008

5 Payee name
NoKOA

6 Payee address; City; State; Zip Code
PO Box 1131
Austin, TX 78767

7 Amount (\$)

\$630.00

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

(If travel outside of Texas, complete Schedule T)

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

Office sought:
Office held:

Date

11/12/2008

Payee name
Paddington Web Design

Payee address; City; State; Zip Code
3007 N Lamar Ste 100
Austin, TX 78705

Amount (\$)

\$1,250.00

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

(If travel outside of Texas, complete Schedule T)

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

Office sought:
Office held:

Date

12/22/2008

Payee name
Papadeaux Seafood Kitchen

Payee address; City; State; Zip Code
6319 N IH35
Austin, TX 78752

Amount (\$)

\$100.00

Purpose of payment (See instructions regarding type of information required.)
Gift cards for employees

(If travel outside of Texas, complete Schedule T)

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

Office sought:
Office held:

Date

12/17/2008

Payee name
Pizza Hut #7113

Payee address; City; State; Zip Code
3435 Greystone #101
Austin, TX 78731

Amount (\$)

\$68.00

Purpose of payment (See instructions regarding type of information required.)
Pizza for reading classes Highland Elementary

(If travel outside of Texas, complete Schedule T)

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

Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 5/6 Report: 9/14

2 FILER NAME Hamilton, Gregory (Hon.)

3 ACCOUNT # (Ethics Commission filers)
78000000

4 Date 11/10/2008	5 Payee name Public Storage 6 Payee address; City; State; Zip Code 8101 N Lamar Blvd Austin, TX 78753	7 Amount (\$) \$23.00
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8 Purpose of payment (See instructions regarding type of information required.) Sign storage (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 12/02/2008	Payee name Public Storage Payee address; City; State; Zip Code 8101 N Lamar Blvd Austin, TX 78753	Amount (\$) \$38.76
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Purpose of payment (See instructions regarding type of information required.) Sign storage (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 10/29/2008	Payee name Soulciti.com Payee address; City; State; Zip Code 815 Brazos Ste 546 Austin, TX 78701	Amount (\$) \$250.00
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Purpose of payment (See instructions regarding type of information required.) Early voting/election-night party ad (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 11/04/2008	Payee name Sweetish Hill Bakery Payee address; City; State; Zip Code 1120 W Sixth St Austin, TX 78703	Amount (\$) \$100.00
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Purpose of payment (See instructions regarding type of information required.) Cookies for election-night party (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: 6/6 Report: 10/14**2** FILER NAME Hamilton, Gregory (Hon.)**3** ACCOUNT # (Ethics Commission filers)
78000000

4 Date 11/04/2008	5 Payee name Tacqueria Jefe 6 Payee address; City; State; Zip Code 6300 N Lamar Blvd Austin, TX 78752	7 Amount (\$) \$649.50
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8 Purpose of payment (See instructions regarding type of information required.) Food for election-night party (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 12/15/2008	Payee name Texas Land and Cattle Payee address; City; State; Zip Code 6007 N IH 35 Austin, TX 78752	Amount (\$) \$58.13
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Purpose of payment (See instructions regarding type of information required.) Lunch meeting with TCSOA president (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 12/11/2008	Payee name The Ambassadors Payee address; City; State; Zip Code 6929 Airport Blvd Austin, TX 78752	Amount (\$) \$750.00
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Purpose of payment (See instructions regarding type of information required.) Annual Chirstmas party of black elected officials (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 10/29/2008	Payee name Villager Newspaper Payee address; City; State; Zip Code 1223-A Rosewood Ave Austin, TX 78702	Amount (\$) \$504.00
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Purpose of payment (See instructions regarding type of information required.) Newspaper ad (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 MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/2 Report: 11/14
2 FILER NAME Hamilton, Gregory (Hon.)		3 ACCOUNT # (Ethics Commission filers) 78000000
4 Date	5 Payee name Canvass Press	8 Amount (\$)
10/31/2008	6 Payee address; City; State; Zip Code 33 Cypress Blvd Round Rock, TX 78665	\$98.50
	7 Purpose of expenditure (See instructions regarding type of information required.) gift Mrs. Limon's 95th birthday celebration (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name HEB #03/425	Amount (\$)
12/15/2008	Payee address; City; State; Zip Code 1000 E 41st St Austin, TX 78751	\$53.47
	Purpose of expenditure (See instructions regarding type of information required.) Food for military-recognition ceremony for Sheriff's Office employees (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name HEB #15/183	Amount (\$)
11/04/2008	Payee address; City; State; Zip Code 9414 N Lamar Blvd Austin, TX 78753	\$20.46
	Purpose of expenditure (See instructions regarding type of information required.) supplies for election-night party (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Oasis	Amount (\$)
12/31/2008	Payee address; City; State; Zip Code 6550 Comanche Tr Austin, TX 78732	\$46.13
	Purpose of expenditure (See instructions regarding type of information required.) Lunch with employee concerning Sheriff's Office matter (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Office Depot	Amount (\$)
12/10/2008	Payee address; City; State; Zip Code 816 Tirado St Austin, TX 78752	\$8.65
	Purpose of expenditure (See instructions regarding type of information required.) Envelopes for holiday cards (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" 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: 12/14
2 FILER NAME Hamilton, Gregory (Hon.)		3 ACCOUNT # (Ethics Commission filers) 78000000
4 Date	5 Payee name Office Depot	8 Amount (\$)
12/18/2008	6 Payee address; City; State; Zip Code 816 Tirado St Austin, TX 78752	\$8.65
	7 Purpose of expenditure (See instructions regarding type of information required.) Envelopes for holiday cards (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Premier Parking	Amount (\$)
11/17/2008	Payee address; City; State; Zip Code 1524 S IH35 Austin, TX 78704	\$10.00
	Purpose of expenditure (See instructions regarding type of information required.) parking at campaign-team victory party (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Trudy's Restaurant	Amount (\$)
11/02/2008	Payee address; City; State; Zip Code 8820 Burnet Rd Austin, TX 78758	\$140.00
	Purpose of expenditure (See instructions regarding type of information required.) Breakfast meeting with Larry Joe Doherty and supporters (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Valero #1304	Amount (\$)
11/04/2008	Payee address; City; State; Zip Code 4311 Springdale Rd Austin, TX 78723	\$30.00
	Purpose of expenditure (See instructions regarding type of information required.) Gas for volunteer to put up signs at polling places (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/1 Report: 13/14

2 FILER NAME Hamilton, Gregory (Hon.)

3 ACCOUNT # (Ethics Commission filers)
78000000

4 Date

12/18/2008

5 Payee name
Martin Middle School

8 Amount (\$)

\$100.00

6 Payee address; City; State; Zip Code
1601 Haskell
Austin, TX 78702

7 Purpose of expenditure (See instructions regarding type of information required.)
sponsor trip to inaugural

CREDITS (optional)

SCHEDULE K

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/1 Report: 14/14
2 FILER NAME Hamilton, Gregory (Hon.)		3 ACCOUNT # (Ethics Commission filers) 78000000
4 Date 12/03/2008	5 Payor name Burnet Road Self Storage	8 Amount (\$) \$47.30
	6 Payor address; City; State; Zip Code 6400 Burnet Rd Austin, TX 78757	
	7 Reason for credit Refund from unused balance on storage space for campaign signs	