

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

7143

## 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 24
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Hon.	FIRST Gregory	MI
	NICKNAME Greg	LAST Hamilton	SUFFIX
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		
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		
812 San Antonio St Ste G23 Austin, TX 78701			
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
(512) 637-7269			
8 REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff
	<input checked="" type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded \$500 limit
9 PERIOD COVERED	Month	Day	Year
	01/01/2009		THROUGH 06/30/2009
10 ELECTION	ELECTION DATE		ELECTION TYPE
	Month	Day	Year
11 OFFICE		12 OFFICE SOUGHT (if known)	
OFFICE HELD (if any) Sheriff, Travis County		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. ..

<input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC  <input type="checkbox"/> additional pages	COMMITTEE TYPE	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		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	\$ 975.00
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2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 31,100.00
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EXPENDITURE TOTALS

3.	TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ 462.74
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4.	TOTAL POLITICAL EXPENDITURES	\$ 14,901.25
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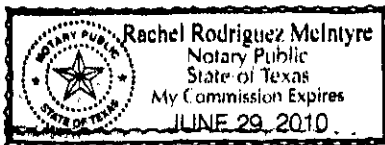
CONTRIBUTION BALANCE

5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 15,923.34
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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.

*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 15<sup>th</sup> day of July, 2009, to certify which, witness my hand and seal of office.

*Rachel Rodriguez McIntyre*      Rachel Rodriguez McIntyre      Notary Public  
 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: 1/12 Report: 3/24

2 FILER NAME Hamilton, Gregory (Hon.)

3 ACCOUNT # (Ethics Commission filers)

78000000

4 Date  
05/18/2009

5 Full name of contributor  out-of-state PAC (ID# C00011114 )  
AFSCME Texas PEOPLE

6 Contributor address; City; State; Zip Code  
7901 Cameron Rd Ste 2-300  
Austin, TX 78754

7 Amount of  
contribution (\$)

\$250.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_ )  
Akin, Louis

05/05/2009

Contributor address; City; State; Zip Code  
6406 Distant View Dr  
Austin, TX 78736

Amount of  
contribution (\$)

\$125.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_ )  
Austin Bail Bonds

04/27/2009

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

Amount of  
contribution (\$)

\$1,000.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_ )  
Austin Police Association PAC

05/17/2009

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

Amount of  
contribution (\$)

\$1,000.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_ )  
Baldwin, Robert III

06/01/2009

Contributor address; City; State; Zip Code  
4500 Christopher Drive  
Austin, TX 78746

Amount of  
contribution (\$)

\$500.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/12 Report: 4/24	
2 FILER NAME Hamilton, Gregory (Hon.)		3 ACCOUNT # (Ethics Commission filers) 78000000	
4 Date 04/28/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Beasley, Roger 6 Contributor address; City; State; Zip Code 6503 Santolina Ave Austin, TX 78731	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 05/21/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Blackwell, Elizabeth Contributor address; City; State; Zip Code 1306 Nueces St Austin, TX 78701	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/02/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) BMcPAC Contributor address; City; State; Zip Code 111 Congress Ave Ste 1400 Austin, TX 78701	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/17/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brown, Clifford Jr. Contributor address; City; State; Zip Code 52 The Hills Dr Austin, TX 78738	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 04/29/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brown, J. Dan Contributor address; City; State; Zip Code 8711 Johnny Morris Rd Austin, TX 78724	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		<b>1</b> PAGE # Schedule: 3/12 Report: 5/24	
<b>2</b> FILER NAME Hamilton, Gregory (Hon.)		<b>3</b> ACCOUNT # (Ethics Commission filers) 78000000	
<b>4</b> Date  05/17/2009	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Call Phonograph, LLC  <b>6</b> Contributor address; City; State; Zip Code 905 E 7th St Austin, TX 78702	<b>7</b> Amount of contribution (\$)  \$500.00	<b>8</b> In-kind contribution description (if applicable)
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	
<b>4</b> Date  05/17/2009	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Car-Nu Wash  <b>6</b> Contributor address; City; State; Zip Code 1201 E 11th St Austin, TX 78702	<b>7</b> Amount of contribution (\$)  \$125.00	<b>8</b> In-kind contribution description (if applicable)
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	
<b>4</b> Date  05/15/2009	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cekuta, Joseph III  <b>6</b> Contributor address; City; State; Zip Code PO Box 518 Austin, TX 78767	<b>7</b> Amount of contribution (\$)  \$250.00	<b>8</b> In-kind contribution description (if applicable)
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	
<b>4</b> Date  05/22/2009	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chris Dorbandt & Associates PLLC  <b>6</b> Contributor address; City; State; Zip Code 603 W 12th St Austin, TX 78701	<b>7</b> Amount of contribution (\$)  \$125.00	<b>8</b> In-kind contribution description (if applicable)
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	
<b>4</b> Date  05/02/2009	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cipriano, Gayle  <b>6</b> Contributor address; City; State; Zip Code 7903 Bracken Ct Austin, TX 78731	<b>7</b> Amount of contribution (\$)  \$250.00	<b>8</b> In-kind contribution description (if applicable)
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/12 Report: 6/24	
2 FILER NAME: Hamilton, Gregory (Hon.)		3 ACCOUNT # (Ethics Commission filers) 78000000	
4 Date  05/02/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Corbin, Dan  6 Contributor address; City; State; Zip Code 603 N 8th St Killeen, TX 76541	7 Amount of contribution (\$)  \$125.00	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  04/18/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Crockett, Moton Jr.  Contributor address; City; State; Zip Code PO Box 2066 Austin, TX 78768	Amount of contribution (\$)  \$500.00	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  05/15/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) DeRoeck, Walter  Contributor address; City; State; Zip Code 3107 Above Stratford Pl Austin, TX 78746	Amount of contribution (\$)  \$1,000.00	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  05/02/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Freeman, Rick  Contributor address; City; State; Zip Code 811 Barton Springs Rd Ste 740 Austin, TX 78704	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  05/17/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fulbright & Jaworski LLP TX Committee  Contributor address; City; State; Zip Code 600 Congress Ave Ste 2400 Austin, TX 78701	Amount of contribution (\$)  \$500.00	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.		<b>1</b> PAGE # Schedule: 5/12 Report: 7/24	
<b>2</b> FILER NAME Hamilton, Gregory (Hon.)		<b>3</b> ACCOUNT # (Ethics Commission filers) 78000000	
<b>4</b> Date  05/16/2009	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gammon, William  <b>6</b> Contributor address; City; State; Zip Code 8304 Zyle Rd Austin, TX 78737	<b>7</b> Amount of contribution (\$)  \$125.00	<b>8</b> In-kind contribution description (if applicable)    (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	
Date  05/17/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gonzalo Barrientos Campaign Fund  Contributor address; City; State; Zip Code 2906 Gem Cir Austin, TX 78704	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  05/17/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Granger, Tom  Contributor address; City; State; Zip Code 2612 Woolridge Dr Austin, TX 78703	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  05/05/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gunter & Bennett PC  Contributor address; City; State; Zip Code 600 W 9th St Austin, TX 78701	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  05/02/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hale, Roy  Contributor address; City; State; Zip Code 8505A Apple Carrie Cv Austin, TX 78745	Amount of contribution (\$)  \$125.00	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: 6/12 Report: 8/24	
2 FILER NAME Hamilton, Gregory (Hon.)		3 ACCOUNT # (Ethics Commission filers) 78000000	
4 Date  05/06/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hinnenkamp, John  6 Contributor address; City; State; Zip Code 920 Maple St Lockhart, TX 78644	7 Amount of contribution (\$)  \$125.00	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  05/17/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Huber, Leonard  Contributor address; City; State; Zip Code 23020 Pedernales Canyon Trl Spicewood, TX 78669	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  05/05/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Inman, Bobby Ret.  Contributor address; City; State; Zip Code 3200 Riva Ridge Rd Austin, TX 78746	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  05/02/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jones, Michael  Contributor address; City; State; Zip Code 1909 Leona #201 Austin, TX 78722	Amount of contribution (\$)  \$125.00	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  04/22/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Keelen, Carolyn  Contributor address; City; State; Zip Code 1514 W 29th St Austin, TX 78703	Amount of contribution (\$)  \$500.00	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: 7/12 Report: 9/24	
2 FILER NAME Hamilton, Gregory (Hon.)		3 ACCOUNT # (Ethics Commission filers) 78000000	
4 Date 05/15/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) King, Susan  6 Contributor address; City; State; Zip Code 4212 Park Hollow Court Austin, TX 78746	7 Amount of contribution (\$) \$200.00	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 05/28/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) LaMantia, Greg  Contributor address; City; State; Zip Code 3900 N McColl Rd McAllen, TX 78501	Amount of contribution (\$) \$500.00	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 05/17/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lipscombe, John  Contributor address; City; State; Zip Code 6600 Mesa Dr Austin, TX 78731	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 05/05/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Madison, Kevin  Contributor address; City; State; Zip Code 740 Polo Club Dr Austin, TX 78737	Amount of contribution (\$) \$125.00	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 05/19/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Maund, Doug  Contributor address; City; State; Zip Code 8400 Research Blvd Austin, TX 78758	Amount of contribution (\$) \$500.00	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: 8/12 Report: 10/24	
2 FILER NAME Hamilton, Gregory (Hon.)		3 ACCOUNT # (Ethics Commission filers) 78000000	
4 Date  05/16/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McCreary, Lou  6 Contributor address; City; State; Zip Code 901 S MoPac Expwy Ste 300 Austin, TX 78746	7 Amount of contribution (\$)  \$100.00	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  05/17/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mercer, James Jr  Contributor address; City; State; Zip Code 15710 Voelker Ln Elgin, TX 78621	Amount of contribution (\$)  \$125.00	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  05/17/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mercer, James Jr  Contributor address; City; State; Zip Code 15710 Voelker Ln Elgin, TX 78621	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  05/17/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mercer, Jessie  Contributor address; City; State; Zip Code 6605 High Point Dr Austin, TX 78723	Amount of contribution (\$)  \$125.00	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  05/15/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Minton Burton Foster & Collins PC  Contributor address; City; State; Zip Code 1100 Guadalupe St Austin, TX 78701	Amount of contribution (\$)  \$500.00	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: 9/12 Report: 11/24

**2** FILER NAME Hamilton, Gregory (Hon.)

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

78000000

**4** Date  
  
05/17/2009

**5** Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Moreno-Williams, Jennifer

**6** Contributor address; City; State; Zip Code  
4612 Chesney Ridge Dr  
Austin, TX 78749

**7** Amount of contribution (\$)

\$125.00

**8** In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

**9** Principal occupation / Job title (See Instructions)

**10** Employer (See Instructions)

Date

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

Contributor address; City; State; Zip Code  
6220 Northern Dancer Dr  
Austin, TX 78746

Amount of contribution (\$)

\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Ojeda, Debra

Contributor address; City; State; Zip Code  
605 W 18th St  
Austin, TX 78701

Amount of contribution (\$)

\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Orr & Olavson PC

Contributor address; City; State; Zip Code  
804 Rio Grande St  
Austin, TX 78701

Amount of contribution (\$)

\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Perry, Edgar III

Contributor address; City; State; Zip Code  
7721 Sandia Loop  
Austin, TX 78735

Amount of contribution (\$)

\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 10/12 Report: 12/24	
2 FILER NAME Hamilton, Gregory (Hon.)		3 ACCOUNT # (Ethics Commission filers) 78000000	
4 Date  05/07/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pinnelli, Janis  6 Contributor address; City; State; Zip Code 2001 Exposition Blvd Austin, TX 78703	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  05/18/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ron Davis Campaign  Contributor address; City; State; Zip Code 5403 Chevy Cir Austin, TX 78723	Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/21/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rosenthal, Marc  Contributor address; City; State; Zip Code 6601 Vaught Ranch Rd Ste 200 Austin, TX 78730	Amount of contribution (\$)  \$2,500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/15/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Salem, Salim  Contributor address; City; State; Zip Code 2905 Mill Reef Cv Austin, TX 78746	Amount of contribution (\$)  \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/17/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sawa, Mark  Contributor address; City; State; Zip Code 10913 Shady Hollow Austin, TX 78768	Amount of contribution (\$)  \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # .. Schedule: 11/12 Report: 13/24	
2 FILER NAME Hamilton, Gregory (Hon.)		3 ACCOUNT # (Ethics Commission filers) 78000000	
4 Date  05/08/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shivers, Allan Jr.  6 Contributor address; City; State; Zip Code 2905 San Gabriel St Ste 213 Austin, TX 78705	7 Amount of contribution (\$)  \$1,000.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  05/13/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Story, Susan  Contributor address; City; State; Zip Code 10804 Pinehurst Dr # A Austin, TX 78747	Amount of contribution (\$)  \$125.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/19/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Theriot, Robert  Contributor address; City; State; Zip Code 6638 Comanche Trl Austin, TX 78732	Amount of contribution (\$)  \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/20/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tomblin, Anthony  Contributor address; City; State; Zip Code 816 Congress Ave Ste 1510 Austin, TX 78701	Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/17/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Travis County Sheriff's Officers Association PAC  Contributor address; City; State; Zip Code 400 W 14th St Ste 220 Austin, TX 78701	Amount of contribution (\$)  \$2,500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 12/12 Report: 14/24

**2** FILER NAME Hamilton, Gregory (Hon.)

**3** ACCOUNT # (Ethics Commission filers)  
78000000

**4** Date **5** Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
04/11/2009 Waring, Colleen

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

**6** Contributor address; City; State; Zip Code  
8007 Epping Ln  
Austin, TX 78745

\$250.00

(If travel outside of Texas, complete Schedule T)

**9** Principal occupation / Job title (See Instructions)

**10** Employer (See Instructions)

Date Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
05/12/2009 Warren, Louis

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

Contributor address; City; State; Zip Code  
4731 Cat Mountain Dr  
Austin, TX 78731

\$5,000.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
04/29/2009 Wholesale Beer Distributors of Texas PAC

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

Contributor address; City; State; Zip Code  
823 Congress Ave Ste 1313  
Austin, TX 78701

\$500.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
05/17/2009 Wile, Sandy

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

Contributor address; City; State; Zip Code  
11600 Quarter Horse  
Austin, TX 78750

\$200.00

(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.		<b>1</b> PAGE # Schedule: 1/6 Report: 15/24
<b>2</b> FILER NAME Hamilton, Gregory (Hon.)		<b>3</b> ACCOUNT # (Ethics Commission filers) 78000000
<b>4</b> Date 05/21/2009	<b>5</b> Payee name Dart Bowl Steak House  <b>6</b> Payee address; City; State; Zip Code 5700 Grover Ave Austin, TX 78756	<b>7</b> Amount (\$)  \$71.00
<b>8</b> Purpose of payment (See instructions regarding type of information required.) Staff event  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		<b>9</b> ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date 06/03/2009	Payee name Drury Plaza Hotel SA Riverwalk  Payee address; City; State; Zip Code 105 S St. Mary's St San Antonio, TX 78205	Amount (\$)  \$162.33
Purpose of payment (See instructions regarding type of information required.) Lodging for assistant whiel attending TABC Supervisor's conference  (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 06/03/2009	Payee name Drury Plaza Hotel SA Riverwalk  Payee address; City; State; Zip Code 105 S St. Mary's St San Antonio, TX 78205	Amount (\$)  \$162.33
Purpose of payment (See instructions regarding type of information required.) Lodging while attending TABC Supervisors conference  (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 05/26/2009	Payee name Edible Arrangements #674  Payee address; City; State; Zip Code 3421 W William Cannon Austin, TX 78745	Amount (\$)  \$82.36
Purpose of payment (See instructions regarding type of information required.) Get Well Basket for employee  (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: 2/6 Report: 16/24
2 FILER NAME Hamilton, Gregory (Hon.)		3 ACCOUNT # (Ethics Commission filers) 78000000
4 Date  05/28/2009	5 Payee name GoDaddy.com  6 Payee address; City; State; Zip Code 1455 N Hayden Rd Ste 219 Scottsdale, AZ 85260	7 Amount (\$)  \$14.97
8 Purpose of payment (See instructions regarding type of information required.) Registration of campaign URLs  (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  05/29/2009	Payee name GoDaddy.com  Payee address; City; State; Zip Code 1455 N Hayden Rd Ste 219 Scottsdale, AZ 85260	Amount (\$)  \$114.06
Purpose of payment (See instructions regarding type of information required.) Registration of campaign URLs  (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  05/14/2009	Payee name Kelly Graphics  Payee address; City; State; Zip Code 1409 Quaker Ridge Austin, TX 78746	Amount (\$)  \$2,098.97
Purpose of payment (See instructions regarding type of information required.) Printing, mailing, and postage of fund-raiser invitation  (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  06/24/2009	Payee name Marie Callender's Restaurant #0230  Payee address; City; State; Zip Code 9503 Research Blvd Ste 400 Austin, TX 78759	Amount (\$)  \$53.13
Purpose of payment (See instructions regarding type of information required.) ITS County Attorney Sheriffs Luncheon  (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: 3/6 Report: 17/24

**2** FILER NAME Hamilton, Gregory (Hon.)

**3** ACCOUNT # (Ethics Commission filers)  
78000000

**4** Date  
01/02/2009

**5** Payee name  
Public Storage

**7** Amount (\$)  
\$48.45

**6** Payee address; City; State; Zip Code  
8101 N Lamar Blvd  
Austin, TX 78753

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

**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  
02/04/2009

Payee name  
Public Storage

Amount (\$)  
\$48.45

Payee address; City; State; Zip Code  
8101 N Lamar Blvd  
Austin, TX 78753

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

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

(If travel outside of Texas, complete Schedule T)

Office sought:  
Office held:

Date  
03/02/2009

Payee name  
Public Storage

Amount (\$)  
\$48.45

Payee address; City; State; Zip Code  
8101 N Lamar Blvd  
Austin, TX 78753

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

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

(If travel outside of Texas, complete Schedule T)

Office sought:  
Office held:

Date  
04/02/2009

Payee name  
Public Storage

Amount (\$)  
\$48.45

Payee address; City; State; Zip Code  
8101 N Lamar Blvd  
Austin, TX 78753

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

\*\* 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: 4/6 Report: 18/24

**2** FILER NAME Hamilton, Gregory (Hon.)**3** ACCOUNT # (Ethics Commission filers)

78000000

**4** Date

05/02/2009

**5** Payee name

Public Storage

**7**Amount  
(\$)

\$48.45

**6** Payee address; City; State; Zip Code8101 N Lamar Blvd  
Austin, TX 78753**8** Purpose of payment (See instructions regarding type of information required.)

Sign storage

(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

06/03/2009

Payee name

Public Storage

Amount  
(\$)

\$48.45

Payee address; City; State; Zip Code

8101 N Lamar Blvd  
Austin, TX 78753

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

Sign storage

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

Office sought:

Office held:

Date

06/17/2009

Payee name

Restaurant Depot

Amount  
(\$)

\$60.10

Payee address; City; State; Zip Code

820 Blackson Ave  
Austin, TX 78752

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

Cooking supplies for Juneteenth celebration

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

Office sought:

Office held:

Date

06/16/2009

Payee name

Sam's Club

Amount  
(\$)

\$56.76

Payee address; City; State; Zip Code

9700 N Capital of TX Hwy  
Austin, TX 78759

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

Aprons/Beverage for Job Fair & Sheriff's Special Event  
Committee(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: 19/24

2 FILER NAME Hamilton, Gregory (Hon.)

3 ACCOUNT # (Ethics Commission filers)  
780000004 Date  
05/04/20095 Payee name  
Stanley-Garrison & Associates  
6 Payee address; City; State; Zip Code  
812 San Antonio St Ste G23  
Austin, TX 787017 Amount  
(\$)  
\$2,000.00

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

Fund-raising and compliance reporting

(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  
Stanley-Garrison & AssociatesAmount  
(\$)

05/14/2009

Payee address; City; State; Zip Code  
812 San Antonio St Ste G23  
Austin, TX 78701

\$3,441.47

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

Fund-raising and compliance reporting

(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  
Stanley-Garrison & AssociatesAmount  
(\$)

06/18/2009

Payee address; City; State; Zip Code  
812 San Antonio St Ste G23  
Austin, TX 78701

\$3,864.21

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

Fund-raising and reimbursement for expenses

(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  
Taqueria JefesAmount  
(\$)

06/25/2009

Payee address; City; State; Zip Code  
720 Lamar Pl Ste B  
Austin, TX 78752

\$259.80

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

ITS County Attorney's Office Sheriff's Office Luncheon

(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: 6/6 Report: 20/24
2 FILER NAME Hamilton, Gregory (Hon.)		3 ACCOUNT # (Ethics Commission filers) 78000000
4 Date 06/11/2009	5 Payee name Texas Land & Cattle #7102  6 Payee address; City; State; Zip Code 6007 N IH 35 Austin, TX 78723	7 Amount (\$)  \$50.63
8 Purpose of payment (See instructions regarding type of information required.) Lunch with Personnel  (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 05/16/2009	Payee name Walmart  Payee address; City; State; Zip Code 1548 FM 685 Pflugerville, TX 78660	Amount (\$)  \$143.24
Purpose of payment (See instructions regarding type of information required.) Candy for Deutschen Fest parade  (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 06/19/2009	Payee name Walmart  Payee address; City; State; Zip Code 1548 FM 685 Pflugerville, TX 78660	Amount (\$)  \$55.94
Purpose of payment (See instructions regarding type of information required.) Candy for Juneteenth parade  (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: 1/4 Report: 21/24
2 FILER NAME Hamilton, Gregory (Hon.)		3 ACCOUNT # (Ethics Commission filers) 78000000
4 Date	5 Payee name Fiesta Mart #25	8 Amount (\$)
05/15/2009	6 Payee address; City; State; Zip Code 3909 38 1/2 St Austin, TX 78722	\$26.28
	7 Purpose of expenditure (See instructions regarding type of information required.) Food for fishing derby  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Fiesta Mart #25	Amount (\$)
05/15/2009	Payee address; City; State; Zip Code 3909 38 1/2 St Austin, TX 78722	\$26.21
	Purpose of expenditure (See instructions regarding type of information required.) Food for fishing derby  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Fiorella's Jack Stack Barbecue	Amount (\$)
03/09/2009	Payee address; City; State; Zip Code 101 W 22nd St Kansas City, MO 64108	\$84.99
	Purpose of expenditure (See instructions regarding type of information required.) Dinner with staff  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Jefe's	Amount (\$)
04/29/2009	Payee address; City; State; Zip Code 6300 N Lamar Ste B Austin, TX 78752	\$487.13
	Purpose of expenditure (See instructions regarding type of information required.) Sponsored lunch for National Antlered Guard Dept.  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name MuayThaiFighting.com	Amount (\$)
05/17/2009	Payee address; City; State; Zip Code Bangkok, Thailand	\$339.01
	Purpose of expenditure (See instructions regarding type of information required.) Boxing supplies for Ann Wolfe Boxing Club for underprivileged children  (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: 2/4 Report: 22/24

2 FILER NAME Hamilton, Gregory (Hon.)

3 ACCOUNT #

(Ethics Commission filers)

78000000

4 Date	5 Payee name	8 Amount (\$)
05/07/2009	Pizza Hut #7103 Payee address; City; State; Zip Code 1144 Airport Austin, TX 78702	\$80.75
	Purpose of expenditure (See instructions regarding type of information required.) 13 pizzas for Campbell Elementary (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
03/03/2009	Payee name Sam's Club Payee address; City; State; Zip Code 130 Sundance Pkwy Ste 300 Round Rock, TX 78681	\$64.40
	Purpose of expenditure (See instructions regarding type of information required.) Food for staff (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
03/04/2009	Payee name Sam's Club Payee address; City; State; Zip Code 130 Sundance Pkwy Ste 300 Round Rock, TX 78681	\$16.11
	Purpose of expenditure (See instructions regarding type of information required.) Food for staff (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
03/05/2009	Payee name Sam's Club Payee address; City; State; Zip Code 9700 N Capital of TX Hwy Austin, TX 78759	\$16.11
	Purpose of expenditure (See instructions regarding type of information required.) Food for staff (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
02/20/2009	Payee name Texas Land & Cattle #7102 Payee address; City; State; Zip Code 6007 N IH 35 Austin, TX 78723	\$59.21
	Purpose of expenditure (See instructions regarding type of information required.) Lunch meeting (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: 3/4 Report: 23/24
2 FILER NAME Hamilton, Gregory (Hon.)		3 ACCOUNT # (Ethics Commission filers) 78000000
4 Date 03/30/2009	5 Payee name Texas Land & Cattle #7102 ..... 6 Payee address; City; State; Zip Code 6007 N IH 35 Austin, TX 78723 ..... 7 Purpose of expenditure (See instructions regarding type of information required.) Lunch with attorney  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	8 Amount (\$)  \$36.39  <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 03/25/2009	Payee name University of Texas Club ..... Payee address; City; State; Zip Code PO Box 7788 Austin, TX 78713 ..... Purpose of expenditure (See instructions regarding type of information required.) Lunch with employee  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	Amount (\$)  \$40.97  <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 04/22/2009	Payee name University of Texas Club ..... Payee address; City; State; Zip Code PO Box 7788 Austin, TX 78713 ..... Purpose of expenditure (See instructions regarding type of information required.) Administrative Support Appreciation Day lunch  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	Amount (\$)  \$47.66  <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 04/23/2009	Payee name University of Texas Club ..... Payee address; City; State; Zip Code PO Box 7788 Austin, TX 78713 ..... Purpose of expenditure (See instructions regarding type of information required.) Staff meeting  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	Amount (\$)  \$32.84  <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 04/30/2009	Payee name University of Texas Club ..... Payee address; City; State; Zip Code PO Box 7788 Austin, TX 78713 ..... Purpose of expenditure (See instructions regarding type of information required.) Lunch with Texas State Associate AD and staff  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	Amount (\$)  \$10.18  <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: 4/4 Report: 24/24

2 FILER NAME Hamilton, Gregory (Hon.)

3 ACCOUNT # (Ethics Commission filers)  
78000000

4 Date	5 Payee name	8 Amount (\$)
06/03/2009	University of Texas Club	\$30.83
	6 Payee address; City; State; Zip Code PO Box 7788 Austin, TX 78713	
	7 Purpose of expenditure (See instructions regarding type of information required.) Constituent lunch w/ Louis Warren & Glen Williams  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
06/10/2009	University of Texas Club	\$57.44
	6 Payee address; City; State; Zip Code PO Box 7788 Austin, TX 78713	
	7 Purpose of expenditure (See instructions regarding type of information required.) Lunch with Bama Brown & Lee Leffignwell  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended