

**SPECIFIC-PURPOSE COMMITTEE
CAMPAIGN FINANCE REPORT**

7431

**FORM SPAC
COVER SHEET PG 1**

The SPAC Instruction Guide explains how to complete this form.		1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed:
3 COMMITTEE NAME Bass For Texas Committee		OFFICE USE ONLY	
4 COMMITTEE ADDRESS <input checked="" type="checkbox"/> Change of Address		ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 80584 Austin, Texas 78708	Date Received 2011 JUL 27 PM 1:49
5 CAMPAIGN TREASURER NAME MS / MRS MR FIRST MI NICKNAME LAST SUFFIX Debra May		Receipt #	Date Hand-delivered or Date Postmarked
6 CAMPAIGN TREASURER'S STREET ADDRESS (Residence or Business)		MS / MRS MR FIRST MI NICKNAME LAST SUFFIX	Date Processed
7 CAMPAIGN TREASURER'S MAILING ADDRESS <input type="checkbox"/> Change of Address		STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 18106 Angel Valley Dr. Leander, Texas 78641	Date Imaged
8 CAMPAIGN TREASURER PHONE		STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 18106 Angel Valley Dr. Leander, Texas 78641	
9 REPORT TYPE		AREA CODE PHONE NUMBER EXTENSION 512 565-5001	
10 PERIOD COVERED		<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> 8th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Dissolution (attach PAC-DR) <input type="checkbox"/> 10th day after campaign treasurer termination	
11 ELECTION		Month Day Year 11 / 2 / 10	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special

FILED FOR RECORD
 2011 JUL 27 PM 1:49
 TARRANT COUNTY CLERK
 TARRANT COUNTY TEXAS

GO TO PAGE 2

**SPECIFIC-PURPOSE COMMITTEE REPORT:
PURPOSE AND TOTALS**

**FORM SPAC
COVER SHEET PG 2**

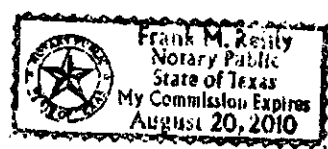
12 COMMITTEE NAME Bass For Texas Committee ACCOUNT # (Ethics Commission Filers):

13 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input checked="" type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholder)	<input checked="" type="checkbox"/> CANDIDATE	CANDIDATE / OFFICEHOLDER NAME <u>S. Glenn Bass</u>
	<input type="checkbox"/> OFFICEHOLDER	OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) <u>Justice of the Peace, Precinct 2</u>
	<input type="checkbox"/> MEASURE	BALLOT IDENTIFICATION / # _____ ELECTION DATE Month Day Year /
	DESCRIPTION	

14 CONTRIBUTION TOTALS EXPENDITURE TOTALS CONTRIBUTION BALANCE OUTSTANDING LOAN TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS). UNLESS ITEMIZED	\$ <u>0</u>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>4,486.59</u>
	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ <u>35.66</u>
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>1,634.42</u>
	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>3,048.90</u>
	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>0</u>

15 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.



[Signature]
Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said S. Glenn Bass, this the 15th day of July, 20 10, to certify which, witness my hand and seal of office.

[Signature] Signature of officer administering oath
Frank M. Reilly Printed name of officer administering oath
Notary Public, State of Texas Title of officer administering oath

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: **1 of 5**

2 FILER NAME
Bass For Texas Committee

3 ACCOUNT # (Ethics Commission Fiers.)

4 Date
6/30/10

5 Full name of contributor out-of-state PAC ID#

Nicole Cromey
6 Contributor address, City, State, Zip Code
**8636 Nddle Lark
Fair Oaks Ranch, Tx.**

7 Amount of contribution (\$)
15.-

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)
Teacher

10 Employer (See Instructions)
Leander I.S.D.

Date
6/30/10

Full name of contributor out-of-state PAC ID#

Des M. Taylor
Contributor address, City, State, Zip Code
**1407 Monte Dr.
Austin, Tx. 78703**

Amount of contribution (\$)
100.-

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
President - Texas

Employer (See Instructions)
National Association of Insurance and Financial Advisors

Date
6/30/10

Full name of contributor out-of-state PAC ID#

Dr. Rosemary Edwards
Contributor address, City, State, Zip Code
**6528 Heron Drive
Austin, Texas 78759**

Amount of contribution (\$)
30.-

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Doctor of Psychology

Employer (See Instructions)
Self

Date
6/30/10

Full name of contributor out-of-state PAC ID#

Republican Club of Austin
Contributor address, City, State, Zip Code
**P.O. Box 13125
Austin, Texas 78711**

Amount of contribution (\$)
1,000.-

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
N/A

Employer (See Instructions)
N/A

Date
6/25/10

Full name of contributor out-of-state PAC ID#

Larrand, LLC
Contributor address, City, State, Zip Code
**211 West 4th
Austin, Texas 78701**

Amount of contribution (\$)
1,000.-

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
N/A

Employer (See Instructions)
N/A

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A
2095

2 FILER NAME
Bass For Texas Committee

3 ACCOUNT # (Ethics Commission Filers)

4 Date: **6/30/10**
5 Full name of contributor: **Timothy Bradberry**
6 Contributor address: **17903 Worley Drive
Pflugerville, Tx. 78660**

7 Amount of contribution (\$): **50.-**
8 In-kind contribution description (if applicable):

(If travel outside of Texas, complete Schedule T.)

9 Principal occupation / Job title (See Instructions)
Transportation Engineer

10 Employer (See Instructions)
Texas Department of Transportation

Date: **6/30/10**
Full name of contributor: **Sharon Jones**
Contributor address: **700 E. 41st. St.
Austin, Tx. 78751**

Amount of contribution (\$): **250.-**
In-kind contribution description (if applicable):

(If travel outside of Texas, complete Schedule T.)

Principal occupation / Job title (See Instructions)
Pilot

Employer (See Instructions)
Southwest Airlines

Date: **6/30/10**
Full name of contributor: **David White**
Contributor address: **7000 Chuck Wagon Trail
Austin, Tx. 78744**

Amount of contribution (\$): **100.-**
In-kind contribution description (if applicable):

(If travel outside of Texas, complete Schedule T.)

Principal occupation / Job title (See Instructions)
Political Consultant

Employer (See Instructions)
Texans For Rick Perry

Date: **6/30/10**
Full name of contributor: **Justin Holt**
Contributor address: **5704 Bostick Dr.
Tyler, Texas 75703**

Amount of contribution (\$): **50.-**
In-kind contribution description (if applicable):

(If travel outside of Texas, complete Schedule T.)

Principal occupation / Job title (See Instructions)
Banker

Employer (See Instructions)
American State Bank

Date: **6/30/10**
Full name of contributor: **Charles Smith**
Contributor address: **115 Sandra Muraida Way, # 415
Austin, Tx. 78703**

Amount of contribution (\$): **200.-**
In-kind contribution description (if applicable):

(If travel outside of Texas, complete Schedule T.)

Principal occupation / Job title (See Instructions)
Co-Owner

Employer (See Instructions)
Maashine Patio Bar & Grill

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A 3 of 5	
2 FILER NAME Bass For Texas Committee		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 6/22/10	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Paula Jo Pierce	7 Amount of contribution (\$) 100.-	8 In-kind contribution description (if applicable)
6 Contributor address, City, State, Zip Code 6811 Glen Ridge Dr. Austin, Tx. 78731		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) Author		10 Employer (See Instructions) Self	
Date 6/29/10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Sean Downing	Amount of contribution (\$) 20.-	In-kind contribution description (if applicable)
Contributor address, City, State, Zip Code 40 IH 35 N. Apt. 12C4 Austin, Tx. 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) BankVue	
Date 6/26/10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Dr. Rosemary Edwards	Amount of contribution (\$) 30.-	In-kind contribution description (if applicable)
Contributor address, City, State, Zip Code 6528 Aaron Drive Austin, Texas 78759		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Doctor of Psychology		Employer (See Instructions) Self	
Date 6/13/10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Kevin Pakenham	Amount of contribution (\$) 100.-	In-kind contribution description (if applicable)
Contributor address, City, State, Zip Code 1101 Swenson Farms Blvd. Pflugerville, Tx. 78660		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Insurance Adjuster		Employer (See Instructions) Pilot Catastrophe Co.	
Date 4/18/10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Britton Overall	Amount of contribution (\$) 25.-	In-kind contribution description (if applicable)
Contributor address, City, State, Zip Code 2424 San Gabriel St. Austin, Tx. 78705		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Banker		Employer (See Instructions) The Bank of Texas	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: **4 of 5**

2 FILER NAME: **Bass For Texas Committee**

3 ACCOUNT # (Ethics Commission Filer):

4 Date: **3/22/10**
 5 Full name of contributor: **Card Weston**
 6 Contributor address: **11110 Crossland Dr. Austin, Tx. 78726**

7 Amount of contribution (\$): **100.-**
 8 In-kind contribution description (if applicable):

9 Principal occupation / Job title (See Instructions): **CPA**
 10 Employer (See Instructions): **Self**

Date: **3/19/10**
 Full name of contributor: **David Green**
 Contributor address: **6305 Crowley Trl. Austin, Tx. 78729**

Amount of contribution (\$): **20.-**
 In-kind contribution description (if applicable):

Principal occupation / Job title (See Instructions): **Charles Austin**
 Employer (See Instructions): **Manager**

Date: **2/20/10**
 Full name of contributor: **Mark Morrow**
 Contributor address: **3201 Century Park Blvd, #923 Austin, Tx. 78727**

Amount of contribution (\$): **50.-**
 In-kind contribution description (if applicable):

Principal occupation / Job title (See Instructions): **Student**
 Employer (See Instructions): **Walden University**

Date: **6/7/10**
 Full name of contributor: **S. Glenn Bass**
 Contributor address: **3220 Feather Grass Ct., #9103 Austin, Tx. 78758**

Amount of contribution (\$): **250.-**
 In-kind contribution description (if applicable):

Principal occupation / Job title (See Instructions): **President/CEO**
 Employer (See Instructions): **The Bass Group, Inc.**

Date: **5/6/10**
 Full name of contributor: **S. Glenn Bass**
 Contributor address: **3220 Feather Grass Ct., #9103 Austin, Tx. 78758**

Amount of contribution (\$): **250.-**
 In-kind contribution description (if applicable):

Principal occupation / Job title (See Instructions): **President/CEO**
 Employer (See Instructions): **The Bass Group, Inc.**

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A 5 of 5	
2 FILER NAME Bass For Texas Committee		3 ACCOUNT # (Ethics Commission Filers):	
4 Date 4/30/10	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#): S. Glenn Bass	7 Amount of contribution (\$) 100.-	8 In-kind contribution description (if applicable)
6 Contributor address City, State, Zip Code 3220 Feather Grass Ct., #9103 Austin, Tx. 78758		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) President / CEO		10 Employer (See Instructions) The Bass Group, Inc.	
Date 4/16/10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#): S. Glenn Bass	Amount of contribution (\$) 550.-	In-kind contribution description (if applicable)
Contributor address: City, State, Zip Code 3220 Feather Grass Ct., #9103 Austin, Tx. 78758		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) President / CEO		Employer (See Instructions) The Bass Group, Inc.	
Date 4/11/10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#): S. Glenn Bass	Amount of contribution (\$) 45.80	In-kind contribution description (if applicable) Exchange Server Fee Internet mod 156 W. 56th St. 160 New York, NY 10010
Contributor address: City, State, Zip Code 3220 Feather Grass Ct., #9103 Austin, Tx. 78758		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) President / CEO		Employer (See Instructions) The Bass Group, Inc.	
Date 3/19/10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#): S. Glenn Bass	Amount of contribution (\$) 4.99	In-kind contribution description (if applicable) Monthly Web Hosting Fee Godaddy.com 144 55th. Hayden Plz # 211 Scottsdale, AZ 85260
Contributor address: City, State, Zip Code 3220 Feather Grass Ct., #9103 Austin, Tx. 78758		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) President / CEO		Employer (See Instructions) The Bass Group, Inc.	
Date 3/1/10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#): S. Glenn Bass	Amount of contribution (\$) 45.80	In-kind contribution description (if applicable) Exchange Server Fee Internet mod 156 W. 56th St. 160 New York NY 100
Contributor address: City, State, Zip Code 3220 Feather Grass Ct., #9103 Austin, Tx. 78758		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) President / CEO		Employer (See Instructions) The Bass Group, Inc.	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Printing Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The instruction Guide explains how to complete this form.

1 Total pages Schedule F: 1 of 5		2 FILER NAME Rass For Texas Committee		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 2/26/10		5 Payee name J P Morgan Chase Bank, N.A.			
6 Amount (\$) 14. -		7 Payee address: City State Zip Code P.O.Box 260180 Baton Rouge, La. 70826			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Accounting / Banking		(b) Description (If travel outside of Texas, complete Schedule F) Monthly Service Fee	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 3/8/10		Payee name Verizon Wireless			
Amount (\$) 236.20		Payee address: City State Zip Code P.O.Box 660108 Dallas, Tx. 75266			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Communications		Description (If travel outside of Texas, complete Schedule F) Telephone Service + Equip.	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 3/22/10		Payee name Quick Print			
Amount (\$) 51.42		Payee address: City State Zip Code 8311 Shoal Creek Blvd. Austin, Tx. 78757			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule F) Business Cards	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 3/22/10		Payee name United States Postal Service			
Amount (\$) 36. -		Payee address: City State Zip Code 1822 W. Braker Ln. Austin, Tx. 78758			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Postal Service		Description (If travel outside of Texas, complete Schedule F) Payment for P.O. Box	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	C./Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 2 of 5	2 FILER NAME: Bass For Texas Committee	3 ACCOUNT # (Ethics Commission Filer):
4 Date: 3/31/10	5 Payee name: J.P. Morgan Chase Bank, N.A.	
6 Amount (\$): 14.-	7 Payee address: City, State, Zip Code P.O. Box 260180 Baton Rouge, La. 70826	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule): Accounting/Banking	(b) Description (If travel outside of Texas, complete Schedule F): Monthly Service Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held
Date: 4/7/10	Payee name: Verizon Wireless	
Amount (\$): 241.79	Payee address: City, State, Zip Code P.O. Box 660108 Dallas, Tx. 75266	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Communications	Description (If travel outside of Texas, complete Schedule F): Telephone Service & Equip
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held
Date: 4/12/10	Payee name: Godaddy.com	
Amount (\$): 4.99	Payee address: City, State, Zip Code 14455 N. Hayden Rd. # 219 Scottsdale, AZ 85260	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Fees	Description (If travel outside of Texas, complete Schedule F): Monthly Web Hosting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held
Date: 4/20/10	Payee name: David Durrett	
Amount (\$): 375.-	Payee address: City, State, Zip Code 802 Evelyn St. Nacogdoches, Tx. 75964	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Fees	Description (If travel outside of Texas, complete Schedule F): Web Development
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F 3 of 5	2 FILER NAME Bass For Texas Committee	3 ACCOUNT # (Ethics Commission Filer)
4 Date 4/30/10	5 Payee name J P Morgan Chase Bank, N.A.	
6 Amount (\$) 12. -	7 Payee address: City: State: Zip Code P.O. Box 260180 Baton Rouge, La 70826	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description (If travel outside of Texas, complete Schedule T) Monthly Service Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 5/5/10	Payee name Intermedia	
Amount (\$) 41.22	Payee address: City: State: Zip Code 156 W. 56th St. 1601 New York, New York 10019	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Exchange Server
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 5/10/10	Payee name Verizon Wireless	
Amount (\$) 233.68	Payee address: City: State: Zip Code P.O. Box 660108 Dallas, TX. 75266	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Communications	Description (If travel outside of Texas, complete Schedule T) Telephone Service & Equip
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 5/10/10	Payee name Godaddy.com	
Amount (\$) 4.99	Payee address: City: State: Zip Code 14455 N. Hayden Rd., #219 Scottsdale, AZ 85260	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Monthly Web Hosting
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--------------------------------------------|
| Advertising Expense | Gift/Awards/Memorials Expense | Salaries/Wages/Contract Labor | Loan Repayment/Reimbursement |
| Accounting/Banking | Legal Services | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Travel In District | Contributions/Donations Made By |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| Fees | Printing Expense | Office Overhead/Rental Expense | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F 4 of 5	2 FILER NAME Bass For Texas Committee	3 ACCOUNT # (Ethics Commission Files)
4 Date 5/18/10	5 Payee name Travis County Republican Party	
6 Amount (\$) 25.-	7 Payee address; City: State; Zip Code 7901 Cameron Rd., Suite 3-202 Austin, Tx. 78754	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contribution	(b) Description (if travel outside of Texas, complete Schedule I) Reagan Round-Up Event Ticket
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 5/28/10	Payee name J.P. Morgan Chase Bank, N.A.	
Amount (\$) 12.-	Payee address; City: State; Zip Code P.O. Box 260180 Baton Rouge, La 70826	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/ Banking	Description (if travel outside of Texas, complete Schedule I) Monthly Service Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 6/2/10	Payee name Intermedia	
Amount (\$) 45.80	Payee address; City: State; Zip Code 156 W 56th St, 1601 New York, New York 10019	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (if travel outside of Texas, complete Schedule I) Exchange Server
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 6/8/10	Payee name Verizon Wireless	
Amount (\$) 23368	Payee address; City: State; Zip Code P.O. Box 660108 Dallas, Tx. 75266	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Communications	Description (if travel outside of Texas, complete Schedule I) Telephone Service & Equip
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F 5 of 5		2 FILER NAME Bass For Texas Committee		3 ACCOUNT # (Ethics Commission Filer)	
4 Date 6/10/10		5 Payee name Godaddy.com			
6 Amount (\$) 4.99		7 Payee address; City, State, Zip Code 144 SS W. Hayden Rd. # 219 Scottsdale, AZ 85260			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Fees		(b) Description (If travel outside of Texas, complete Schedule F) Monthly Web Hosting	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 6/30/10		Payee name J. P. Morgan Chase Bank, N.A.			
Amount (\$) 12.-		Payee address; City, State, Zip Code P.O. Box 260180 Baton Rouge, La 70826			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Accounting / Banking		Description (If travel outside of Texas, complete Schedule F) Monthly Service Fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date		Payee name			
Amount (\$)		Payee address; City, State, Zip Code			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule F)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date		Payee name			
Amount (\$)		Payee address; City, State, Zip Code			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule F)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED