

**SPECIFIC-PURPOSE COMMITTEE
CAMPAIGN FINANCE REPORT**

**FORM SPAC
COVER SHEET PG 1**

The SPAC Instruction Guide explains how to complete this form.		1 ACCOUNT # (Ethics Commission Filers) 7448	2 Total pages filed: 1 of 11
3 COMMITTEE NAME Bass For Texas Committee		OFFICE USE ONLY	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 80584 Austin, Tx. 78708		Date Received FILED FOR RECORD Date Hand Delivered or Date Postmarked Date Processed Date Imaged
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Debra NICKNAME LAST SUFFIX May		Receipt # Amount Date Processed Date Imaged
6 CAMPAIGN TREASURER'S STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 18106 Angel Valley Dr. Leander, Tx. 78641		
7 CAMPAIGN TREASURER'S MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 18106 Angel Valley Dr. Leander, Tx. 78641		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION 512 565-5001		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Dissolution (attach PAC-DR) <input type="checkbox"/> Runoff <input type="checkbox"/> 10th day after campaign treasurer termination		
10 PERIOD COVERED	Month Day Year Month Day Year 7 / 1 / 10 THROUGH 9 / 23 / 10		
11 ELECTION	ELECTION DATE 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	

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

**FORM SPAC
COVER SHEET PG 2**

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

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

14 CONTRIBUTION 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>4180</u>
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ <u>196.86</u>
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>6565.55</u>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>653.53</u>
OUTSTANDING LOAN TOTALS	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 4th day of October, 20 10, to certify which, witness my hand and seal of office.

Billy F. Peel **BILLY F. PEEL** Notary
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

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: 10 FS	2 FILER NAME Bass For Texas Committee	3 ACCOUNT # (Ethics Commission Filers)
4 Date 9/2/10	5 Payee name Inter media	
6 Amount (\$) 38.80	7 Payee address; City; State; Zip Code 56 W. 56th St. #1601 New York, New York 10019	
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 T) Exchange Server
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 9/2/10	Payee name CAA - Jewish Outlook	
Amount (\$) 254.-	Payee address; City; State; Zip Code 7300 Hart Lane Austin, TX 78731	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (if travel outside of Texas, complete Schedule T) Jewish Outlook Publications
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 9/7/10	Payee name Verizon Wireless	
Amount (\$) 173.79	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 T) Telephone Service Equip.
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 9/9/10	Payee name Home Depot	
Amount (\$) 316.18	Payee address; City; State; Zip Code 10515 W. MoPac Austin, TX 78758	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Materials/Advertising	Description (if travel outside of Texas, complete Schedule T) Sign Installation Supplies
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: 2 pgs	2 FILER NAME Bass For Texas Committee	3 ACCOUNT # (Ethics Commission Filers)
4 Date 9/10/10	5 Payee name Travis County Republican Party	
6 Amount (\$) 75.-	7 Payee address; City; State; Zip Code 7901 Cameron Rd #3-202 Austin, Tx. 78754	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Rent	(b) Description (If travel outside of Texas, complete Schedule T) Rent
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 9/10/10	Payee name Go Daddy.com	
Amount (\$) 4.99	Payee address; City; State; Zip Code 14455N 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
Date 9/14/10	Payee name Ampro Productions	
Amount (\$) 1,500.-	Payee address; City; State; Zip Code 7202 Smoky Hill Rd. Austin, Tx. 78736	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) Signs
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 9/17/10	Payee name Ampro Productions	
Amount (\$) 1,438.99	Payee address; City; State; Zip Code 7202 Smoky Hill Rd. Austin, Tx. 78736	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) Signs
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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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: 3 of 5		2 FILER NAME Rass For Texas Committee		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 8/3/10		5 Payee name Intermedia			
6 Amount (\$) 38.80		7 Payee address; City; State; Zip Code 156 W 56th St. #1601 New York, New York 10019			
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 T) Exchange Server	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 8/9/10		Payee name Verizon Wireless			
Amount (\$) 233.55		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 8/10/10		Payee name Godaddy.com			
Amount (\$) 4.99		Payee address; City; State; Zip Code 1455 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	
Date 8/10/10		Payee name Ampro Productions			
Amount (\$) 376.17		Payee address; City; State; Zip Code 7202 Smoky Hill Rd. Austin, Tx. 78736			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Advertising		Description (If travel outside of Texas, complete Schedule T) Bumper Stickers	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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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 Buss For Texas Committee	3 ACCOUNT # (Ethics Commission Filers)
4 Date 7/14/10	5 Payee name GoDaddy.com	
6 Amount (\$) 53.58	7 Payee address; City; State; Zip Code 14455 N. 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 T) Domain Registry
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 7/16/10	Payee name Ampro Productions	
Amount (\$) 250.38	Payee address; City; State; Zip Code 7202 Smoking Hill Rd. Austin, Tx. 78734	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) Labels
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 7/26/10	Payee name TCRP Federal Committee	
Amount (\$) 500.-	Payee address; City; State; Zip Code 7901 Cameron Rd, # 3-202 Austin, Tx. 78754	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Exp.	Description (If travel outside of Texas, complete Schedule T) Mailers
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 7/29/10	Payee name Travis County Republican Party	
Amount (\$) 75.-	Payee address; City; State; Zip Code 7901 Cameron Rd, # 3-202 Austin, Tx. 78754	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Rent	Description (If travel outside of Texas, complete Schedule T) Rent
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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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: SOFS		2 FILER NAME Rass For Texas Committee		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 7/2/10		5 Payee name Potts & Reilly, LLP			
6 Amount (\$) 750.-		7 Payee address; City; State; Zip Code 1621 W. 6th St. Austin, TX 78711			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Legal Services		(b) Description (If travel outside of Texas, complete Schedule T) Legal Services	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought / Office held	
Date 7/6/10		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 T) Exchange Server	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought / Office held	
Date 7/7/10		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 7/12/10		Payee name Go Daddy, Com			
Amount (\$) 4.99		Payee address; City; State; Zip Code 144 S. 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 CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 1 of 4	
2 FILER NAME Buss For Texas Committee		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 9/14/10	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert Hoats	7 Amount of contribution (\$) 100.-	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 1402 San Antonio, Ste 102 Austin, TX. 78701		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) Developer/Consultant		10 Employer (See Instructions) Self	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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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: <i>2 of 4</i>	
2 FILER NAME <i>Bass For Texas Committee</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>7/26</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Sheila Bass</i>	7 Amount of contribution (\$) <i>100.</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>442 Morris Rd. Dobell, Tx. 75941</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <i>Home maker</i>		10 Employer (See Instructions)	
Date <i>8/20/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Lone Star Self Storage</i>	Amount of contribution (\$) <i>1,000.</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1341 W. Mary St. Austin, Tx 78704</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>N/A</i>		Employer (See Instructions) <i>N/A</i>	
Date <i>8/24/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Austin Republican Womens Club PAC</i>	Amount of contribution (\$) <i>250.</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>5302 S. Scout Island Cr. Austin, Tx, 78731</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>N/A</i>		Employer (See Instructions) <i>N/A</i>	
Date <i>9/7/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Austin Apartment Assoc. PAC</i>	Amount of contribution (\$) <i>1,000.</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>4107 Medical Pkwy. Austin, Tx, 78756-3735</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>N/A</i>		Employer (See Instructions) <i>N/A</i>	
Date <i>9/12/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Debra May</i>	Amount of contribution (\$) <i>500.</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>18106 Angel Valley Dr. Llano, Tx, 78641</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Home Maker</i>		Employer (See Instructions)	

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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: <i>5 of 4</i>	
2 FILER NAME <i>Bass For Texas Committee</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>9/23/10</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Karen De Rouen</i>	7 Amount of contribution (\$) <i>30-</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>10705 Watering Rock Ln. Austin TX 78759</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <i>Home maker</i>		10 Employer (See Instructions)	
Date <i>9/23/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>James Hock</i>	Amount of contribution (\$) <i>20-</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>3220 Feather Grass Ct # 9104 Austin TX 78758</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Software Consultant</i>		Employer (See Instructions) <i># P</i>	
Date <i>9/23/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Timothy Bradberry</i>	Amount of contribution (\$) <i>25-</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>17903 Wooley Dr. flugerville, TX 78660</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Engineer</i>		Employer (See Instructions) <i>Texas Dept. of Transportation</i>	
Date <i>7/26/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>David Hartman</i>	Amount of contribution (\$) <i>500-</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>10711 Burnet Rd, Ste. 330 Austin, TX. 78758</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Chairman</i>		Employer (See Instructions) <i>Hartman and Associates, Inc.</i>	
Date <i>7/26/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Douglas Hartman</i>	Amount of contribution (\$) <i>500-</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>10711 Burnet Rd, Ste. 330 Austin tx. 78758</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>President</i>		Employer (See Instructions) <i>Hartman and Associates, Inc</i>	

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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 4	
2 FILER NAME Bass For Texas Committee		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 8/31/10	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Leslie Ross	7 Amount of contribution (\$) 25-	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 718 Summer Dr. Mesquite, Tx. 75149		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) Home maker		10 Employer (See Instructions)	
Date 9/15/10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Timothy Bradberry	Amount of contribution (\$) 45-	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 17903 Westly Dr. Pflugerville, Tx. 78660		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Texas Dept. of Transportation	
Date 9/18/10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Carla Birk	Amount of contribution (\$) 10-	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 9817 Big View Dr. Austin, Tx. 78730		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Home maker		Employer (See Instructions)	
Date 9/23/10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Michael Watson	Amount of contribution (\$) 25+	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1502 B Summer Creek Dr. Austin, Tx. 78704		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Walter		Employer (See Instructions) Chryx	
Date 9/23/10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Maritula Singh	Amount of contribution (\$) 50+	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1406 Katie Lynch Dr. Pflugerville, Tx. 78660		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Home maker		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

Pass For Texas
P.O. Box 80584
Austin TX. 78708



FILED FOR RECORD
10 OCT -5 11 21

DANA DEBEAUVOUR
COUNTY CLERK
TRAVIS COUNTY TEXAS

Travis County Clerk
Attn: Elections Div
P.O. Box 14935
Austin, TX. 78714-9325

AUSTIN PDC TX 78710

MON 04 OCT 2010 PM